

COLUMBIA UNIVERSITY
Columbia Tennis Center
Policies and Procedures

GENERAL INFORMATION

Participant's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

18 Years or Older (check one)? YES NO *(for minors, a Parent/Guardian is also required to review and sign this form)*

ABOUT THE ACTIVITY

By accessing the Columbia Tennis Center, I acknowledge my agreement to the following:

- You can reserve courts through our court booking system on our website.
- All players must check-in at the front desk and pay in full prior to playing on the courts. Credit card, or check is acceptable. All patrons will be required to sign a waiver prior to their first court time.
- All players must wear proper tennis attire and tennis sneakers with non-marking soles.
- All cancellations after 24 hours will be required to pay the full amount of the reservation.
- Players are welcomed to use the locker room facilities on the first floor. The upstairs locker rooms are exclusively for Columbia's Tennis Teams and not open to the public.
- Lessons may be given at the tennis center by professionals who have been approved by the Director of Tennis and have signed the proper documentation.
- Smoking is prohibited at the Columbia Tennis Center.
- Please do not walk on court until designated time of play.
- Pets are not permitted on the grounds.
- The use of courts beyond assigned time will be subject to charge.
- No food or beverages other than water and sports drinks are permitted on courts.

I have read this document, fully understand its terms, and have signed it freely and voluntarily.

Signature of Participant

Date

Print Name

For minors only, a parent/guardian must sign acknowledging and agreeing to the above information, terms and conditions on behalf of their minor Participant:

Parent/Guardian information:

Parent/Guardian Name: _____ Relation: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

Signature of Parent/Guardian

Date

FOR ELECTRONIC SIGNATURE ONLY

I understand and agree that by typing my initials below and submitting this document electronically it is the legal equivalent of signing and dating the hard copy version. I also understand and agree that by typing my initials below and submitting this document electronically I am affirming to the truth of the information contained herein.

Initials of Participant _____ (also fill out above section)

For minors only, initials of Parent or Guardian _____ (also fill out above section, including contact information)

IMPORTANT INFORMATION

In Case of an Emergency, first contact local help by dialing 911 or the local authorities.