



Jarkko Nieminen Tennis Academy Registration Form

Participant's Name: _____
Last Name First Name Middle

Tennis Club: _____

Home Address: _____

City: _____ Postal Code: _____ Country: _____

Home Phone #: (____) _____ Work Phone #: (____) _____
(Please include Country and City Codes) (Please include Country and City Codes)

Cell Phone #: (_____) _____ (Player)

Cell Phone #: (_____) _____ (Parent)
(Please include Country and City Codes)

Player Email Address: _____ (Please Print)

Parent Email Address: _____ (Please Print)

Other Contacts: _____ Parents Name: _____

Male Female Junior (Birthdate: _____ Age: ____)

Start Date: _____ Finish Date: _____



Payment

Note: All payments must be made to J.N. Tennis Academy Ry. Invoices for the program payment will be sent out to parents email address.

Payment Terms:

- Payments for all weekly programs and traveling weeks must be received prior to arrival

Payment Information:

J. N. Tennis Academy Ry
Nordea Bank
IBAN/Account Number: FI37 1745 3000 1540 07
BIC: NDEAFIHH

Terms and Policies

- You acknowledge and agree to assume and be fully responsible for any and all property or other damage to any facilities used at JNTA Ry.
- Traveling costs are not included in any JNTA's program prices. Traveling with JNTA in accordance with JNTA traveling policy.
- JNTA is not responsible for lost or stolen articles or money. DO NOT bring valuable items.
- JNTA agrees to provide the player the chosen program for the duration indicated by the terms of this contract.
- The player and his family agree to promptly provide payment for all the due fees related to the membership fees and traveling costs.
- In case of forced medical/injury withdrawal or temporary leave from J.N. Tennis Academy financial agreements will be discussed on a case-by-case basis.
- In case of voluntary withdrawal from the J.N.Tennis Academy financial obligations and terms will be discussed on a case-by-case basis.
- I certify that I am the guest/Participant and/or the parent of the guest/Participant and agree to these terms and policies as evidenced by my signature below.

Participant or

Parent/Guardian's Signature: _____

Date: _____