



SOUTHAMPTON TENNIS CLUB: MEMBERSHIP APPLICATION FORM

ADULT MEMBER(S) - 19 & OLDER		OFFICE USE
(1) FIRST NAME:	LAST NAME:	TAG #
PHONE #	EMAIL:	
(2) FIRST NAME:	LAST NAME:	TAG #
PHONE #	EMAIL:	

HOME ADDRESS:

JUNIOR MEMBER(S) - (18 & under) must be 5 years old in year of membership

FIRST NAME	LAST NAME	DOB (MM/YY)	OFFICE USE
(1)		/	TAG #
(2)		/	TAG #
(3)		/	TAG #
(4)		/	TAG #

Emergency Contact for Junior(s) - Name: _____ Phone: _____

Duration	Family (Parents & Juniors)	Adults (19+)	JUNIOR(s) (18 & under)	Total Fee
SEASON	<input type="checkbox"/> @ \$495	# of adults @ \$225 = ____	# of Jrs @ \$140 = ____	\$
# OF WEEKS	<input type="checkbox"/> @ \$210/week	# of adults @ \$95/wk = ____	# of Jrs @ \$55/wk = ____	\$
Month - any 4 weeks <input type="checkbox"/> July <input type="checkbox"/> August Start date:	<input type="checkbox"/> @ \$295/month	# of adults @ \$140 / month = ____	# of Jrs @ \$95 / month = ____	\$

DONATIONS

I would like to help the STC maintain its facilities and programs by adding this amount to my / our payment:

\$25 \$50 \$75 \$100 \$250 \$500 Other \$ _____

Please make cheques payable to <i>Southampton Tennis Club</i>	Total Payable	\$
Payer Name: _____ Phone #: _____		
Office use only: Payment type <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card <input type="checkbox"/> Debit		

STC Staff Name: _____ Date: _____

MEMBERSHIP PACKAGES

Membership packages include group lessons. Juniors must be 5 years old within the current calendar year to participate. Special tennis clinics are not included. A playing guest will be charged a \$10/day for Juniors & \$15/day for adults to a maximum of 3 days. After 3 days, the guest will be invited to join as a weekly member. All rates include HST.

In exchange for membership, for myself and/or any junior member named above and for each of my/their heirs, executors and legal representatives (all of whom I am authorized to bind), I:

- Accept that STC activities have risks and expressly assume them.
- Agree that the STC, its directors, staff, and agents and their heirs, executors and legal representatives will not be liable for and are hereby released from any loss, damage, injury, or costs howsoever caused or sustained by me or any junior member named above while at STC facilities or while participating in any way in any STC activities wherever located.
- Irrevocably authorize the Southampton Tennis Club to edit, alter, copy, exhibit, publish, or distribute photos for any lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my likeness appears.
- By providing this information, I/we are giving the STC permission to communicate with me/us via email and understand that the STC will not share this information with anyone outside of the STC

Signature(s) of Adult Member(s) or Payor(s) for Junior(s):

1) _____

Date: _____

2) _____

Date: _____

STC Staff Name: _____

Date: _____