



MEMBERSHIP APPLICATION FORM ROYAL PARK TENNIS CLUB INC.

MEMBERSHIP DETAILS

APPLICANT

| | | | |
|-----------------------|-------------------------------|---|--------------------------------|
| TITLE | (Mr / Mrs / Miss / Ms) | CATEGORY | (Tick) |
| SURNAME | | ADULT | |
| GIVEN NAME | | ADULT CONCESSION – Pension Card Holder Health Care Card Holder Student Card Holder under 25 Years | |
| ADDRESS | | | |
| SUBURB | | | JUNIOR (under 18 years of age) |
| POST CODE | | FAMILY 1 (1 parent & 1 or more juniors) | |
| PHONE (HOME) | | FAMILY 2 (2 parents & 1 or more juniors) | |
| PHONE (WORK) | | NON PLAYING | |
| PHONE (MOBILE) | | <u>CURRENT TENNIS CLUB MEMBERSHIPS</u> | |
| DATE OF BIRTH | | <u>PREVIOUS TENNIS CLUB MEMBERSHIPS</u> | |
| OCCUPATION | | | |
| EMAIL ADDRESS | | | |

**Do not include your email address if you do not want to be contacted via email - Newsletters
Emails save the club on postage, paper and man hours.**

TENNIS VICTORIA DETAILS

| | |
|-----------------|--|
| YES / NO | Royal Park Tennis Club is my Primary Facility |
| | Tennis Vic Player Registration No. (if known) |

(Your primary facility is usually where you play most of your tennis. If you are competing in Tennis Victoria Pennant competition it is recommended that you name your Pennant Club as your primary facility)

Privacy Statement -

The Royal Park Tennis Club requires this information for the purpose of providing your Club Membership and your Registration to Tennis Victoria.

Your Personal information will be forwarded to Tennis Victoria to be used in accordance with the purposes of Tennis Victoria to provide membership services.

Individual members can access their personal information through Tennis Victoria and the Royal Park Tennis Club upon reasonable notice.

OTHER APPLICANTS TO BE INCLUDED IN FAMILY MEMBERSHIP (Includes spouse/partner or juniors under 18 years as at the 1st July)

| SURNAME | GIVEN NAMES | DATE OF BIRTH | RELATIONSHIP TO APPLICANT | Primary Facility (Y/N) | OCCUPATION |
|---------|-------------|---------------|---------------------------|------------------------|------------|
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |

SIGNATURE - I, the undersigned, wish to apply for membership and agree to abide by the Club's Rules, By-Laws and constitution if this application is accepted

Main applicant signature:

Date:

| | |
|--|--|
| | |
|--|--|

Forward Payment (cheques payable to Royal Park Tennis Club) to:-

Membership Secretary - Carole Houston, 47 Strelton Avenue, Strathmore 3041

N.B. Please also complete the additional details over the page

ADDITIONAL APPLICATION DETAILS

To assist the committee with processing your application for membership, please complete the following additional details

PREVIOUS COMPETITION TENNIS DETAILS

| Association | Year | Grade |
|-------------|------|-------|
| 1. | | |
| 2. | | |

PREVIOUS TENNIS CLUB INVOLVEMENT (if any)

| Club | Year | Role |
|------|------|------|
| 1. | | |
| 2. | | |

INTEREST IN COMPETITION TENNIS COMPETITION

(tick one or more)

| COMPETITION | FORMAT | COMP DAY | TIME |
|-------------------------------------|----------------|---------------------------------|--------|
| <input type="checkbox"/> N.S.T.A | MIXED | SATURDAY | PM |
| <input type="checkbox"/> N.S.T.A | MENS | SATURDAY | PM |
| <input type="checkbox"/> N.S.N.T.A | LADIES | TUESDAY | NIGHTS |
| <input type="checkbox"/> N.S.N.T.A | MIXED | WEDNESDAY | NIGHTS |
| <input type="checkbox"/> N.S.N.T.A | MENS | THURSDAY | NIGHTS |
| <input type="checkbox"/> PENNANT | LADIES | SAT/SUN | AM/PM |
| <input type="checkbox"/> PENNANT | MENS | SAT/SUN | AM/PM |
| <input type="checkbox"/> N.S.L.T.A | LADIES | THURSDAY | AM |
| <input type="checkbox"/> N.S.J.T.A. | MIXED, BOYS | FRIDAY (A GRADE) | PM |
| <input type="checkbox"/> N.S.J.T.A. | MIXED, BOYS | SATURDAY (A Res & Other Grades) | AM |

INTEREST IN OTHER CLUB ACTIVITIES

If yes, provide details (eg Social, Team Captain, assist with Junior Teams, Committee Member,

| | |
|-----------------------------------|--|
| <input type="checkbox"/> YES | |
| <input type="checkbox"/> NO | |
| <input type="checkbox"/> NOT SURE | |

REFERENCES (list any current members as references) Include initial Club contact person.

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REASONS FOR JOINING ROYAL PARK (Include if from Meetup group)

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THANK-YOU FOR YOUR APPLICATION

| | Fees Payable | Date Payments Received |
|----------------------------|--------------|------------------------|
| MEMBERSHIP CATEGORY | | |
| Joining Fee | \$ | |
| Annual Membership | \$ | |
| Total Fee Payable | \$ | |

Application form and payment should be mailed to Carole Houston, 47 Strelton Avenue, Strathmore 3041 or dropped off at Club Office in opening hours.

Payment by cheque made payable to Royal Park Tennis Club
Eftpos at club or Credit card details below:-

VISA / MASTERCARD Expiry Dates/.....

Please debit my credit card as detailed above. Signed.....

Child Safety: This club promotes the safety, wellbeing and inclusion of all children.