

The Calgary Tennis Club
 1445 16St SW
 P.O. Box 4504, Station "C"
 Calgary, Alberta T2T 5N3
 (403) 244-5302
 (403) 244-5314 (Fax)



2010 MEMBERSHIP APPLICATION

Choose membership type:

EARLY BIRD

(Postmarked no later than April 15/10)

- ___ \$261 Single Adult
- ___ \$404 Adult Couple
- ___ \$436 Family
- ___ \$146 Student**
- ___ \$168 Senior (65+)
- ___ \$ 68 Junior <18

Price includes GST.

** Proof of age/student id required

FULL SEASON

(Postmarked after April 15/10)

- ___ \$289 Single Adult
- ___ \$440 Adult Couple
- ___ \$478 Family
- ___ \$157 Student**
- ___ \$188 Senior (65+)
- ___ \$ 68 Junior <18

Price includes GST.

** Proof of age/student id required

PAYMENT METHOD

(to be filled in by staff)

Received:

- ___ Cash
- ___ Cheque
- ___ Debit
- ___ Visa/MC/Amex

Tennis Alberta Amount: _____

Note: Day Pass Rate is \$20

Tennis Alberta would like to establish direct contact with all tennis players in Alberta. They are also offering a new Recreational Tennis Development membership. See attached info sheet.

- YES, I give my consent for CTC to share my email address with Tennis Alberta. This information will not be shared with any other organization and can be deleted from the Tennis Alberta database at anytime upon request.
- YES, I would like to purchase a Tennis Alberta Recreational Tennis Development membership for \$10 per member. Please include the additional amount with my payment above. Greater contributions also welcome.

MEMBERSHIP INFORMATION

Renewing Member

Please print clearly.

LAST NAME: _____ First: _____ Sex: ___ M ___ F

ADDRESS: _____ CITY: _____ Postal Code: _____

PHONE (H) (403) - _____ (W) (403) - _____ Email _____

Ability _____ REGISTER FOR "Hit List"

Basic 2.0-3.0
 Intermediate 3.5-4.0
 Advanced 4.5-5.0+

The Club publishes a Member's "Hit List" in order to facilitate matches for members. Your name, telephone number and ability level is available to all members.

Age Category (from list below):

- 0-5 6-10 11-15 16-17 18-25 26-30 31-35 36-40 41-45 46-50 51-55 56-60 60+

REGISTERED FAMILY MEMBERS

SPOUSE: LAST NAME: _____ First: _____ Sex: ___ M ___ F

PHONE (H) (403) - _____ (W) (403) - _____ Email _____

Ability _____ (from list above) REGISTER FOR "Hit List"

CHILDREN

Last Name: _____ First: _____ Age: _____ Ability: _____ Sex: ___ M ___ F HIT LIST? ___
 Last Name: _____ First: _____ Age: _____ Ability: _____ Sex: ___ M ___ F HIT LIST? ___
 Last Name: _____ First: _____ Age: _____ Ability: _____ Sex: ___ M ___ F HIT LIST? ___
 Last Name: _____ First: _____ Age: _____ Ability: _____ Sex: ___ M ___ F HIT LIST? ___

MEMBERSHIP CONDITIONS AND PERSONAL INFORMATION WAIVER

I, and on behalf of any other persons included under this membership, do consent to the Calgary Tennis Club (CTC) collecting, using or disclosing any of my personal information or depictions or photographs of my likeness collected by or produced to the CTC for CTC purposes. Such information may be communicated, collected or otherwise produced to the CTC by myself or a third party and includes the personal information necessary to properly complete this form, to participate in any CTC activities, and any photographs taken of my person or which depict my likeness. I further confirm that I am endorsing my informed consent and acknowledge that this form acts as proper notice to the collection, use and disclosure of my personal information and likeness by the CTC.

I, and on behalf of any other persons included under this membership, agree to abide by all CTC bylaws, rules and regulations, including proper court dress. In addition, I, my heirs, executors and administrators, agree to release the CTC, its agents, servants, officers, directors, successors and assigns of and from any and all claims, demands, actions, causes of actions whatsoever which I have had, now have or shall hereafter have arising out of or relating to any loss, damage or injury including death that may be sustained by me or any of my property while in, upon or around the premises of the CTC or any place or premises under the control or supervision of the CTC. **I HAVE READ AND UNDERSTAND THE CONDITIONS OF THIS MEMBERSHIP. NOT VALID UNTIL SIGNED BY BOTH PARTIES.**

DATE: _____ SIGNATURE: _____

WITNESS: _____

DATE: _____ SIGNATURE (spouse): _____

WITNESS: _____

For Juniors (under 18):

I, the parent/guardian of _____, agree to all of the above stated conditions.

DATE: _____ SIGNATURE: _____

DATE: _____ WITNESS: _____

For New Members:

I WAS REFERRED TO CTC BY (NAME): _____

THANK YOU FOR YOUR PARTICIPATION AS A MEMBER OF THE
CALGARY TENNIS CLUB
info@calgarytennisclub.com
www.calgarytennisclub.com