



MEMBER RENEWAL & NOMINATION 2018/2019

Note- membership application and renewal is available on line at WWW.TENNIS.COM.AU/MYTENNIS

Members who renew a full year membership by 31 July 2018 go into a Draw to win a cash prize

46 Warwick Road, Duncraig WA 6023
 Ph: 9448 6591
 ABN 16 824 280 014
 Internet: www.sorrentotennis.myclub.org.au
 Email: sorrentotennis@westnet.com.au

To the Committee of Management,
 I/We wish to renew membership/ become a member of Sorrento Tennis club and, if accepted, agree to conform to and abide by the Constitution, Rules and By-Laws of the Club.

ADULT (Please note- your Date of Birth & email is necessary to meet Tennis Australia requirements)

Last name _____ First Name _____ M/F DOB ___/___/___

Last name _____ First Name _____ M/F DOB ___/___/___

JUNIOR (under 18 at 1 July)

Last name _____ First Name _____ M/F DOB ___/___/___

Last name _____ First Name _____ M/F DOB ___/___/___

Contact details

Address: _____ Post Code _____

Phone: (Home) _____ (Mob) _____ (Bus) _____

Email: _____

I am interested in assisting the club as a volunteer - in any role or in a specific specify area _____

I do/ do not give permission for my child/ren's photographs to be used in the club's newsletter/ website/ promotional material

SIGNATURE _____ Date ___/___/___

Your application is conditional upon the following:

1. Payment of fees with this application.
2. Ability to play tennis at an acceptable standard.
3. Acceptance by the Executive Committee of the Club.

	Adult	Junior	Couple	Family	Associate (non playing)	3Month	6Month	Parent**	Concession #	YOU PAY:
Renewal Fee	\$240	\$94	\$400	\$497	\$38	\$102	\$151	\$99	\$215	\$
Gold Option	100		200	(to waive all social playing fees- add \$100 per adult)					90	\$
Night Light waiver	50									
TOTAL:										\$

Fees include GST and Tennis West affiliation.

*Nomination fees apply for new members to the club

**Parent membership entitles you to member usage of courts only for play practice with own child

#Concession- Age pensioners or full time students over 18 years old- (show your pension/student card at the office to receive the discount)

Method of payment:

cash cheque EFTPOS bank transfer credit card

Sorrento Tennis Club Inc. BSB 306 074 Account 4187825 (Please include your name to identify the transaction)

Visa/ Mastercard (complete details below or pay at the club or online)

Credit Card Number: _____ Expiry Date ___/___ Amount \$ _____.

Name on card _____ Signature _____

This form shall be a TAX INVOICE on acceptance by the Executive Committee