



MEMBERSHIP APPLICATION

NAME: _____ **DOB** _____ **M / F** _____

MAILING ADDRESS: _____

PHONE NUMBER: Home: _____ Work: _____ Cell: _____

EMAIL: _____

<u>INITIATION FEE:</u>	Adult	\$ 560 _____	Paid	Yes	No
	Junior (8-19)	\$ 57 _____	Paid	Yes	No
	Social (non playing)	\$ 112 _____	Paid	Yes	No
	Summer (3 months)	\$ 112 _____	Paid	Yes	No
	Silver	\$ 336 _____	Paid	Yes	No
	Winter (6 months	\$ 224 _____	Paid	Yes	No
	Introductory)				

MEMBERSHIP TYPE:

SINGLE: _____	Annual \$963	Quarterly \$240.75	AMOUNT \$ _____	Paid
SENIOR: (over 60 -10%) _____	Annual \$868	Quarterly \$217	AMOUNT \$ _____	Paid
COUPLE: (-10%) _____	Annual \$1736	Quarterly \$434	AMOUNT \$ _____	Paid
SENIOR COUPLE: (-20%) _____	Annual \$1540	Quarterly \$385	AMOUNT \$ _____	Paid
JUNIOR: (-50%) _____	Annual \$482	Quarterly \$120.50	AMOUNT \$ _____	Paid
SILVER: _____	Annual \$578	Quarterly \$144.50	AMOUNT \$ _____	Paid
SOCIAL: _____	Annual \$28		AMOUNT \$ _____	Paid
3 MONTHS TRIAL: _____	\$350 (No initiation Fee)		AMOUNT \$ _____	Paid
3 MONTHS SUMMER: _____	\$350 (June, July & August)		AMOUNT \$ _____	Paid
6 months Introductory winter: _____	\$700 (October to March)		AMOUNT \$ _____	Paid

All Fees include HST!

<u>MEMBERSHIP FEES:</u>	ANNUALLY (-5% if prepaid)	Yes	No
	QUARTERLY (4 post dated cheques, Nov, Feb, May & Aug)	Yes	No
KEY DEPOSIT	\$50 (Refundable)		

Received by (Board Member)DATE:

Special Notes:



COMMUNITY INDOOR TENNIS
 PO Box 2038 6000 Lighthouse Avenue SECHELT BC V0N 3A0
 604 885 9640 or 604 885 6470 playtennis@dccnet.com
www.srctennis.ca

WAIVER OF LIABILITY

I HEREBY WAIVE AND RELEASE FOR MYSELF, MY HEIRS, EXECUTORS, ADMINISTRATORS AND ASSIGNEES ANY CLAIM FOR DAMAGES, INJURIES, DEMANDS AND ACTIONS, WHATSOEVER IN ANY MANNER ARISING OR GROWING OUT OF MY PARTICIPATION IN THE [SUNCOAST RACQUET CLUB](#). I HEREBY ATTEST AND VERIFY THAT I HAVE FULL KNOWLEDGE OF THE RISKS INVOLVED, AND ASSUME ALL RESPONSIBILITY FOR MEDICAL OR EMERGENCY EXPENSES IN THE EVENT OF ACCIDENT, ILLNESS OR ANY OTHER INCAPACITY REGARDLESS OF WHETHER I HAVE AUTHORIZED SUCH EXPENSES, AND THAT I AM SUFFICIENTLY AND PHYSICALLY FIT TO PARTICIPATE IN THE [SUNCOAST RACQUET CLUB](#). I ALSO AGREE TO THE FOLLOWING CODE OF CONDUCT REQUIRED TO USE THE [SUNCOAST RACQUET CLUB'S](#) FACILITY:

- I WILL KEEP THE COURTS CLEAN BY WEARING ONLY INSIDE COURT SHOES ONCE INSIDE THE FACILITY.
- I WILL USE RECEPTACLES PROVIDED FOR GARBAGE & RECLYCLING & HELP TO KEEP THE COURTS, KITCHEN, WASHROOMS AND VIEWING AREA CLEAN.
- NO FOOD OR DRINKS (OTHER THAN WATER) WILL BE BROUGHT ONTO COURT AREA.

I AGREE TO THE USE OF PHOTOS OR VIDEOS TAKEN AT THE [SUNCOAST RACQUET CLUB](#) , AFFILIATED EVENTS, SUMMER CAMPS, SCHOOL SESSIONS, TENNIS BC EVENTS & TOURNAMENTS ETC.FOR PROMOTION AND ADVERTISING PURPOSES.

SIGNATURE:.....**DATE:**.....

Printed Name:

PARENT'S SIGNATURE: (FOR PERSONS UNDER 18 YEARS).....

.....



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