**MEMBERSHIP APPLICATION**

**For membership 1 July 2023 to 30 June 2024**

**First Name: ………………………………………… Surname: ………………………………………………………………………..……..**

**Date of Birth: ................................................ Male/Female (please circle)**

**Address:…………………………………………………………………………………………………………………………………………………………...**

**Suburb: ………………………………………………… State: ………………………… Postcode: ………………………………**

**Phone: Home: ……………………………………… Work: ……………………………………… Mobile:……………………………………….**

**Email: ………………………………………………………………………………………………………………………………………………………………**

**Type of Membership fee: (tick appropriate box) Adult $40.00 🗖 Junior (under 18) $30.00 🗖**

**Family (two adults and two or more juniors) $80.00 🗖 Total $........................ Please advise names of other family members to be included in Family Memberships only.**

**Name of Adult:……………………………………………………………………… Date of Birth…………………………………………………..**

**Name of Junior: ……………………………………………………………………. Date of Birth: …………………………………………………**

**Name of Junior: ……………………………………………………………………. Date of Birth: …………………………………………………**

**Name of Junior: …………………………………………………………………….. Date of Birth: ………………………………………………..**

**Signature of Applicant ……………………………………………………………………………………………………………………………….**

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**Please forward your membership application with the appropriate fees to the above postal address, return to the Pro-One clubhouse office (Cunningham St. South Tweed Heads) or by direct deposit (please use your name as reference) to:**

**Tweed Heads Tennis Club Inc.**

**Commonwealth Bank – Tweed City Shopping Centre Tweed Heads NSW**

**BSB: 062-611 ACCOUNT NUMBER: 00902432**