



## MEMBERSHIP APPLICATION 2019-20

Main contact name (parent / guardian if under 18 years)	
Address	Home telephone
	Mobile
Postcode	Email

### Member details

Name	Membership Category	Date of Birth	Age	Male/ Female	Subscription
					£
					£
					£
					£
					£
<b>TOTAL</b>					<b>£</b>

Category	Description	Annual Subscription
Senior	Adult - from 26 to 60yrs	£300
Young Family	2 adults with children up to age 17	£540
Single Parent Family	1 adult with children up to age 17	£300
Super/Vet Senior	61 years and over	£200
Midweek	Mondays - Fridays, 09.00 - 17.50	£200
Young Adult	18 - 25 years	£180
Student	18 - 22 years (with NUS card)	£100
Junior	12 - 17 years	£85
Mini	6 - 11 years	£55
Tots	0 - 5 years	Free
Parent	Parent entitled to play only with junior member	£85
Country	An adult who lives a distance from the club/has a primary membership elsewhere or only play matches.	£85

Note (1): The annual subscriptions include affiliations to Herts LTA. All subscriptions run from **1st May** for one year and existing members should renew by **1st May**. Pro-rata fees are available from September - please email for more information.

**Please return completed application form to the Green Membership Box** in the Club House, marked

Membership Secretary | Sawbridgeworth  
Tennis Club Springhall Road |  
Sawbridgeworth | CM21 9ET  
E: info@sawbridgeworthtennis.org.uk

### Pay by Direct BACS transfer to:

Sawbridgeworth Tennis Club  
Sort Code: 20-36-98 Account No. 2085 1272  
Or by cheque payable to Sawbridgeworth  
Tennis Club

**Please turn over to complete and sign application form**



**Notes and Special Requirements**

To ensure the safety of all members when at the Club, please use the box below to describe any special care needs, dietary requirements, allergies or medical conditions:

**Member's signature**

**Signed**.....

**Date**.....

**Parent/guardian declaration (essential if applicant is under 16 years of age)**

By signing and returning this form, I agree to the junior applicants named overleaf, taking part in the general activities of the club. He/she has agreed to follow the junior rules of the club, and I agree to accept the code of conduct for parents.

To my knowledge, he/she has no special care needs, dietary requirements, allergies or medical conditions that could affect his/her safety at the club, other than those declared on this form. I understand that in the event of any injury, illness or other medical need, all reasonable steps will be taken to contact me, and to deal with the situation appropriately.

I understand that I must inform the club of any changes to the information provided on this form.

**Signed** .....

**Date:**.....

**Name:**.....

**Relationship to Junior applicant(s):** .....