



**2026 HOT SPRINGS VILLAGE
PICKLEBALL CLUB MEMBERSHIP ONLY \$15**

Membership with Name Tag \$23

**ALL MEMBERS MUST HAVE THIS FORM ATTACHED
TO THE PAYMENT**

RENEWAL NAME(S)

DATE: _____

NAME _____

NAME _____

EMAIL _____

EMAIL _____

PHONE _____

PHONE _____

I would like a new Name Tag for \$8 ☐

I would like a new Name Tag for \$8 ☐

☐ **Include** my information on the member-only website

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NEW MEMBERS

DATE: _____

NAME _____

NAME _____

EMAIL _____

EMAIL _____

PHONE: _____

PHONE: _____

I would like a Name Tag for \$8 ☐

I would like a Name Tag for \$8 ☐

☐ **Include** my information on the member-only website

☐ **Include** my information on the member-only website

Special name request for Name Tag _____

Special name request for Name Tag _____

CASH _____ CHECK # _____

Your check **or** cash **MUST** be attached to this form

Make payable to HSV Pickleball Club, drop it in the box at Desoto Clubhouse or mail it to

PO BOX 8714

Hot Springs Village, AR 71910