

Annual ECCTA Dues

Adult Membership	Junior (13-18)	Family Discount (2 Adults + 2 Children... 12 and under)	Charitable Donation
\$60	\$25	\$100	\$ ---

*Financial Hardship Rate available pending ECCTA Board Approval. Email membership@eccta.net for information.

Charitable Donations: The ECCTA is a 501(c)(3) non-profit organization. Donations are always welcome and tax deductible.

Membership Application/ Renewal Form

Adult Name 1: _____ Gender: M or F

Adult Name 2: _____ Gender: M or F

Junior Name 1: _____ Gender: M or F

Junior Name 2: _____ Gender: M or F

Address: _____ City: _____

Zip: _____ Email(s): _____

Phone #: _____ Junior 1 DOB: _____ Junior 2 DOB: _____

Preferred Play Time: Day ___ Evening ___ Weekend ___

Level of Play: Novice ___ 3.0 ___ 3.5 ___ 4.0 ___ 4.5 ___ 5.0 ___

Would you like to be included in the Membership Directory: Yes ___ No ___

***** Waiver of Liability & Photo Release*****

In consideration of the acceptance of my participation in any East County Community Tennis Association activity, I hereby waive and release all rights to claim for damages for personal injuries, property damage or other loss which I may have, or which may hereafter accrue me (or my heirs or assigns) as a result of my participation in such said activity. This release is intended to discharge in advance the Grossmont Union School District, the County of San Diego, and East County Community Tennis Association, its officers and directors, as well as any individual directing or helping conduct said activity from and against any and all liability might otherwise arise out of acts or omissions of the persons or entities mentioned above. I further understand that serious accidents occasionally occur in connection with the sport of tennis, and that participants occasionally sustain personal injuries and/or property damage as a consequence thereof. Knowing the risks of tennis, nevertheless, I hereby agree to assume those risks and to release and hold harmless all of the persons or entities mentioned above whom, for any reason, might otherwise be liable to me (or my heirs or assigns) for damages.

I hereby irrevocably authorize East County Community Tennis Association to edit, alter, copy, exhibit, publish, or distribute photos for purposes of publicizing the ECCTA's programs or for any other lawful purpose . In addition, I waive the right to inspect or approve the finished product, including the written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph.

I agree to adhere to all ECCTA rules and ECCTA Code of Conduct.

Adult 1 (print): _____ Signature: _____ Date: _____

Adult 2 (print): _____ Signature: _____ Date: _____

If member is a junior (under 18 years), parent or guardian must also sign below.

Name (print): _____ Signature: _____ Date: _____

Please send completed form to: ECCTA, P.O Box 854, La Mesa, CA 91944 or bring form and cash/check to the Club House