

MEMBERSHIP FORM - 2017/18

MEMBER DETAILS

Name.....Date of Birth.....

Address.....

Email Address.....Contact Ph No.....

MEMBERSHIP CATEGORY

I/We wish to join the Rowville Tennis Club under the following membership type. Please circle the appropriate membership category. All fees includes Tennis Victoria insurance

30 DAY FREE TRIAL (SOCIAL)

HOT SHOT FAMILY \$6	0 (\$15 PER TERM)	JUNIC	R COMPETITION	\$70 (\$35	PER SEASON)
SENIOR COMPETITION	\$120 (\$60 PER SEAS	SON)	FAMILY COMPETI	TION \$24	40	
SOCIAL (SINGLE) \$80	SOCIAL (FAMILY)	\$140				

Payment amount: \$ _____

Payment method:
Cheque
Cash
Bank transfer

BANK: WESTPAC BSB: 733126 ACCOUNT NO: 525396 ROWVILLE TENNIS CLUB

Family member details

Please enter details of all family members below:

Name/email address	Male/Female	Date of Birth

□ **MEDIA RELEASE** Please tick this box *if you object* to images of the above members being used for promotional purposes