

Date of Application: _____

Date of Acceptance: _____

APPLICATION FOR JUNIOR/SUMMER MEMBERSHIP

{Junior Membership: \$300 Initiation & \$150 quarterly dues. Summer Membership: \$500}.

Minimum age is 10 years. Termination of Junior Membership can be by the member or by the Board of Directors at any time, but eventually at the 21st birthday.

NAME _____ Birth date _____

Address _____ City _____ Zip _____ Telephone # _____

School: _____ Grade: _____ E-mail _____

Tennis Ability: Beg/Nov Int Adv USTA age group & ranking

School Tennis Coach's Name & Phone # _____

Have you had lessons/clinics before? ____ Where & for how long? _____

Are you taking lessons now? ____ How often do you play tennis? _____

What other sports do you play? _____ What are your hobbies?

“If accepted for membership, I agree to comply with the Rules and Regulations of the Club.”

Applicant's Signature: _____

Parents' Name(s): _____

Parents' Occupation(s): _____

“I/We will guarantee payment of dues and charges to the Peninsula Tennis Club and respect for its rules.”

Parent Email address: _____ Parent's Signature: _____

1. Primary Sponsor: _____

Signature of Senior PTC Member