

MEMBERSHIP APPLICATION FORM

Date	:					
Full Name	:					
Address	:					
Suburb	:			Postcode	; :	
Date of Birth	:			Femal	le 🔲 Male	
Mobile	:		Home / W	/ork :		
Email	:					
Type Of Membership						
\$10 Adult 1 year \$24		☐ \$24 Adult	3 years	\$35	\$35 Adult 5 years	
□ \$5 Age Pension 1 year □ \$12 A		☐ \$12 Age Pe	nsion 3 years		Age Pension 5 years	
\$5 Student 1 year						
Sponsorship Group (if applicable) :						
Declaration						
hereby declare that I am 18 years or over and agree to abide by the Constitution and Codes of Conduct of the Wollongong Tennis Club.						
Signature						
/alid Identification required (Driver's Licence, Passport, NSW Photo). Pension or Student card required with applicable membership.						
Office Use O	nly					
Date Paid :	-		Staff Signati	ure :		