

# Wellington Tennis Club

## Membership Application Form

Please complete this form and submit it with your monies and a stamp addressed envelope (for return of membership card and access codes) to James Evans, Meadowside House, Lower Westford, Wellington, Somerset, TA21 0DN. **(For Juniors under the age of 16 years this form needs to be signed by a parent or guardian.)**

**Please complete a separate form for each person joining, including those applying for family membership.**

Name (please print)		Date of birth(Juniors):	
Gender (Juniors)	Male / Female (delete as appropriate)		
Address			
Contact numbers:	Home		
	Mobile		
Email address *			

For Junior members, please provide details of a parent/guardian:

Name (please print)			
Relationship to child			
Contact numbers:	Mobile		
	Home		
	Work		
Address			
Email address *			

**\*It is important to include your email address, if you have one, as the majority of correspondence is now sent via email. Please write clearly so we can read it properly. For those without email, copies of any correspondence, including copies of the newsletter, will be left in named envelopes in the clubhouse.**



**Type of Membership Applied For:**

(Please tick)

**Senior**  
Adults over 16

**Junior/Student**  
In full-time education

**Family**  
Up to 2 Seniors +  
3 Juniors/Students

**Price: £80.00**

**Price: £35.00**

**Price: £170.00**

**I am /am not (please delete as appropriate) interested in playing in league matches.**

**Parent/Guardian Declaration (essential if applicant is under 16 years of age)**

By signing and returning this form, I agree to ..... (Child's name) taking part in the general activities of the club. He/she has agreed to follow the junior rules of the club, and I agree to accept the code of conduct for parents (displayed in clubhouse).

To my knowledge, he/she has no special care needs, dietary requirements, allergies or medical conditions that could affect his/her safety at the club, other than those listed in the box below.

I understand that in the event of any injury, illness or other medical need, all reasonable steps will be taken to contact me, and to deal with the situation appropriately.

I understand that I must inform the club of any changes to the information provided on this form.

**I agree/do not agree (please delete as appropriate) to the above named individual being included in any publicity, including photographs and film footage, whilst taking part in tennis club activities.**

Signed:.....Date:.....

Name (please print).....

Relationship to child.....

**Club Declaration**

**As a member of Wellington Tennis club I agree to abide by the rules of the club (displayed in club house) and for my details to be included on the club database.**

**I enclose a cheque, made payable to Wellington Tennis Club, for .....**

**Member's signature (parent/guardian if applying for junior membership):**

Signed ..... Date.....

