



TRARALGON TENNIS ASSOCIATION INC MEMBERSHIP FORM

OCTOBER 01, 2024, TO SEPTEMBER 30, 2025

Name [input box]

Mailing Address [input box]

Mobile Phone [input box]

Email [input box]

Date of Birth (Juniors Only) [input box]

12 MONTH MEMBERSHIPS

- ADULT \$170.00
CONCESSION / STUDENT \$130.00
JUNIOR \$165.00 (includes Saturday Morning Ball and Playing Fees)
FAMILY (2 adults/3 children) \$370.00 (does not include Saturday morning Junior Ball and Playing Fees, ball and playing fees are \$50.00 per child for Saturday Morning Summer Comp)

Please note that all Twelve-Month Memberships are due and payable by Monday November 04, 2024

NIGHT TENNIS SEASON MEMBERSHIPS

Table with 3 columns: Season, Adult Price, Concession Price. Rows: SPRING September 2024 to December 2024 (\$100.00 ADULT, \$80.00 CONCESSION); SUMMER February 2025 to May 2025 (\$100.00 ADULT, \$80.00 CONCESSION)

Spring Night Tennis Memberships are due and payable by Friday September 13, 2024

Please remember if you pay a Night Tennis Season Membership you are only covered for that season you are playing in. Should you choose to play in the Summer Twilight comp you will need to pay another Night Season Membership. It is more economical for you to pay a yearly membership and have full access to the courts and comps throughout the year.

If paying for a family membership, please list names and Date of Birth for all children covered the membership covers.

Name D.O.B. Name D.O.B. Name D.O.B. Name D.O.B.

I/We agree to abide by the rules, by-laws, and the constitution of the Traralgon Tennis Association Inc. Membership becomes effective on receipt of this application form and payment of membership fees.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Payment can be made by Cash, Cheque, Credit Card or Direct Credit, details over page

Should you want to pay by direct deposit instalments please let us know and we will organise for you.

*If paying by direct credit, please put a note with your payment or email Susie so that we know you have paid. It is important to still fill out a form so that we can make sure we have all your correct details.*

**Direct Credit Details**

BSB 033-259  
Account No. 426714  
Westpac

**Credit Card Details**

Cardholder Name \_\_\_\_\_ Number \_\_\_\_\_

Signature \_\_\_\_\_ Expiry Date \_\_\_\_\_ CCV \_\_\_\_\_

*Thank you so much*

*Susie Grumley  
Traralgon Tennis Association Manager*

*0448 551 610  
sec@traralgontennis.com*

**Office Use Only**

Date Paid \_\_\_\_\_

Amount \_\_\_\_\_

Payment Type \_\_\_\_\_

Membership Card Number \_\_\_\_\_