



TRARALGON TENNIS ASSOCIATION INC MEMBERSHIP FORM
OCTOBER 01, 2026, TO SEPTEMBER 30, 2027

Name

Mailing Address

Mobile Phone

Email

Date of Birth (Juniors Only)

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 Memberships are due and payable by Monday October 12, 2026

NIGHT TENNIS SEASON MEMBERSHIPS

SPRING September 2026 to December 2026	\$100.00 ADULT	\$80.00 CONCESSION
SUMMER February 2027 to May 2027	\$100.00 ADULT	\$80.00 CONCESSION

Spring Night Tennis Memberships are due and payable by Monday September 14, 2026

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 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, 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.



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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 up to date and 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 _____