

# CLAREMONT TENNIS CLUB

www.claremonttennis.co.za

## APPLICATION FOR MEMBERSHIP

Membership Year : 1st September 2019 to 31st August 2020

*Section A and C must be completed by all applicants, while Section B must be completed by all prospective Student / Junior members*

### SECTION A: PERSONAL DETAILS

Surname:

First Name:

Title:

ID No.:

\*Date of Birth:

Tel (w):

Tel (h):

Cell No.:

Postal address:

Code:

Email Address:

Parent/Guardian's Email Address:

*To be completed if applicant a student/junior*

Previous Club:

League Played:

*I agree to abide by the Club's Constitution and the rules made pursuant thereto from time to time.*

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

\*\* Proposer's Name: \_\_\_\_\_

Signature: \_\_\_\_\_

\*\* Seconder's Name: \_\_\_\_\_

Signature: \_\_\_\_\_

\* Required by Tennis Western Province to enable them to organise tournaments in various age categories. Also required by Club to ascertain category of member.

\*\* APPLICATION FORMS WILL NOT BE ACCEPTED IF THE APPLICANT HAS NOT BEEN PROPOSED AND SECONDED, ONE OF WHICH MUST BE A COMMITTEE MEMBER.

\*\*\* **NOTE:**

The Claremont Tennis Club Management Committee reserves the right to grant/decline membership to applicants. All applications will be reviewed at a monthly committee meeting whereafter the applicant will be informed of the outcome of the application.

In spirit of encouraging an acceptable standard of play amongst all our members, the Committee reserves the right to withhold membership should the candidate require some coaching before being successful in his/her application.

## SECTION B: CONSENT OF PARENT / GUARDIAN

Name of Applicant's School / College / University:

Name of Parent / Guardian:

Address of Parent / Guardian:

Code:

*I consent to my child / ward becoming a member of Claremont Tennis Club and accept responsibility for all fees payable.*

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

## SECTION C: FEES PAYABLE

Please indicate which category of membership you wish to apply for by making a cross in the appropriate space in the table below

MEMBERSHIP CATEGORY	ENTRANCE FEE	ANNUAL SUBSCRIPTION	WPT LEVY	CATEGORY APPLIED FOR PLEASE TICK
Senior	Nil	R1860	R250	
Student	Nil	R1130	R250	
Junior U12 - 18yrs	Nil	R550		
Non-Playing	Nil	R290		
Temporary* 2 months	Nil	R685		
Temporary** 6 months	Nil	R1280		

\* As per the Constitution which reads 'Temporary\* : A visitor requiring membership for a period of less than 6 weeks'

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\*\*\* Please note that a Ball Levy is included in the annual Subscription Fees

**NOTE: DO NOT SEND ANY PAYMENT FOR SUBSCRIPTIONS**  
Once your application has been approved by a Committee member,  
a letter of acceptance and an account will be sent to you.

APPLICATIONS MAY BE SCANNED AND EMAILED TO THE SECRETARY

[info@claremonttennis.co.za](mailto:info@claremonttennis.co.za)