

# Leixlip Tennis Club

## Application for Membership Renewal 2018/2019

From 1<sup>st</sup> March 2018 to 28<sup>th</sup> February 2019 (At 2017 Rates)



PLEASE USE BLOCK CAPITALS WHEN COMPLETING THIS FORM (ALL DETAILS MUST BE COMPLETED)

**Name**

**Address**

**Phone** (Home & Mobile)

**Email** (Essential)

**PLEASE ENSURE A LEGIBLE & REACHABLE EMAIL ADDRESS IS PROVIDED.**

Email Addresses provided will be used for sending ALL information to members.

**Swipe Card**

Please insert the first 6/7 digits of your swipe card in the boxes above. Your card will be updated for the current membership year on receipt of payment.

### Membership Type (Please Circle)

	Single	Family	Student	Junior U/13	Junior 13-18	Senior Citizen
Membership Fee	€195	€300	€110	€60	€80	€115
Development Levy	€15	€20	€10	€0	€0	€10
<b>Total Fee to 28 February 2018</b>	<b>€210</b>	<b>€320</b>	<b>€120</b>	<b>€60</b>	<b>€80</b>	<b>€125</b>

Student Membership is for fulltime students over 18 years. (To qualify as a student, a photocopy of student ID must be attached to the membership form)

<b>Family Members</b>	Name	Date of Birth (Jnrs)	Gender (M/F)	Will Play Competitions / Socially
If family membership, please fill in individual names and if under 18 years old, their date(s) of birth.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Family membership includes children under 18 years of age and fulltime students.

<b>Junior Members</b>	Date of Birth	Signature of Parent Guardian
If junior membership, please complete the following:	<input type="text"/>	<input type="text"/>

Are you interested in playing in Dublin Leagues / Provincial Towns Competitions?  **Yes**  **No**

### Signature of Main Applicant

I agree to the membership of Leixlip Tennis Club as applied for on this form with payment of the appropriate fee.

I also agree on behalf of myself and all members listed on this form to comply the Leixlip Tennis Club Constitution and Bye Laws (available at [www.leixliptennisclub.com](http://www.leixliptennisclub.com)) and Codes of Conduct for Children / Young People and Parents / Guardians supplied on the reverse of this application.

I also agree on behalf of myself and all members listed on this form to be photographed for events relating to Leixlip Tennis Club for promotional purposes.

**Please sign here →**

Date: \_\_\_\_\_

Completed forms should be sent to: **Sean Kavanagh**  
Membership Secretary, LTC,  
16 Glen Easton Crescent  
Leixlip  
Tel: 087 2217309

Cheques should be made payable to: **Leixlip Tennis Club**