

# Leixlip Tennis Club

Application for New Membership 2019/2020

Membership up to 29 February 2020 (PRO RATA Rate)



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

<b>Name</b>		<b>Gender</b> (M/F)	
-------------	--	------------------------	--

<b>Address</b>	

<b>Phone</b> (Home & Mobile)	Home	Mobile
------------------------------	------	--------

<b>Email</b> (Essential)	
--------------------------	--

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

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

<b>Membership Type (Please Circle)</b>						
	Single	Family	Student	Junior U/13	Junior 13-18	Senior Citizen
Membership Fee	€100	€150	€55	€25	€35	€60
New Member Entrance Fee	€85	€120	€40	€0	€0	€0
Development Levy	€15	€30	€10	€5	€5	€10
<b>Total Fee to 29 February 2020</b>	<b>€200</b>	<b>€300</b>	<b>€105</b>	<b>€30</b>	<b>€40</b>	<b>€70</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.				

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:		

Are you interested in playing in Dublin Leagues / Provincial Towns Competitions?	<b>Yes</b>		<b>No</b>	
--	------------	--	-----------	--

<b>Signature of Main Applicant</b>
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 <a href="http://www.leixliptennisclub.com">www.leixliptennisclub.com</a> ) and Codes of Conduct for Children / Young People and Parents / Guardians.
I also grant permission that I, and all members listed on this form may be photographed during events relating to Leixlip Tennis Club for promotional purposes.
<b>Please sign here →</b>
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**