



Shalford Lawn Tennis Club

Membership application form

Welcome to Shalford Tennis Club. In order to provide a safe club for all our junior and senior members, and to keep you up to date with club activities, we would like you to tell us some information about yourself.

Please complete this form and get a parent or guardian to sign it if you are less than 16 years old. By filling in this form, you are also being automatically signed up as a British Tennis Member for free. This will enable you to take advantage of the many benefits offered to British Tennis Members including Wimbledon tickets, exclusive news and discounts and a player rating. For more information visit: www.LTA.org.uk/membership

Please return the form to: Matt Trevail, 19 Onslow Road, Guildford, GU1 4HU

If you have any further enquiries, please contact Matt on 07792761595 or matt@shalfordtennisclub.co.uk

Membership Type	Subscription	Joining Fees
Senior (18 or over on 01/09/11)	£52	£20
Junior (under 18 on 01/09/11)	£31	£10
Student (over 18 in full time education)	£41	£10
Household	£104	£50

Date of application:.....

Name(s) - please print	Membership type	Date of birth (if junior)	Gender (delete as appropriate)
		/ /	Male / Female
		/ /	Male / Female
		/ /	Male / Female
		/ /	Male / Female
		/ /	Male / Female

Address		
Contact numbers	Home:	
	Mobile:	
Email address		

Please provide details of a parent/guardian that we can contact in case of an emergency for all junior members:

Name (please print)		
Relationship to child		
Contact numbers:	Mobile	
	Home	
	Work	
Address		
Email address		

Please use the box below to describe any special care needs, dietary requirements, allergies or medical conditions:

Member's signature:

Signed:..... Date.....

Parent/guardian declaration (essential if applicant is under 16 years of age)

By signing and returning this form, I agree to (child's name) taking part in the general activities of the club. He/she has agreed to follow the junior rules of the club, and I agree to accept the code of conduct for parents.

To my knowledge, he/she has no special care needs, dietary requirements, allergies or medical conditions that could affect his/her safety at the club, other than those declared on this form. I understand that in the event of any injury, illness or other medical need, all reasonable steps will be taken to contact me, and to deal with the situation appropriately.

By giving your consent to you/your child becoming a British Tennis Member, you also agree that you/your child will abide by the Terms and Conditions of British Tennis Membership (at www.LTA.org.uk/BTMTTC) and that the LTA and its directly affiliated bodies (see www.LTA.org.uk/affiliatedbodies) can use the personal data of you/your child, including sensitive personal data that you provide, for the purposes of your involvement in British Tennis, and to send you/your child by post, e-mail or SMS information related to those purposes (for more information see www.LTA.org.uk/privacy).

I understand that I must inform the club of any changes to the information provided on this form.

Signed:..... Date:.....

Name:..... Total Enclosed: £.....
(cheques payable to Shalford LTC)