

# MEMBERSHIP RENEWAL/APPLICATION

## 1 April 2012 to 31 March 2013



### SUBSCRIPTION RATES:

Please tick the appropriate box

RENEWAL   
NEW MEMBER\*

RENEWALS ONLY

MEMBERSHIP CATEGORY (age on 1 <sup>st</sup> April 2012)	ANNUAL SUBSCRIPTION	Discount before 1 April 2012	Payment by standing order (10 monthly payments)
SENIOR	£220	£200	£22.00
SENIOR CITIZENS (age 65 and over)	£130	£120	£13.00
UNDER 21	£130	£120	£13.00
UNDER 18	£75	£70	£7.50
UNDER 11	£45	£40	£4.50
WEEKDAY (Monday to Thursday up to 6pm or 4pm when only three carpet courts available; Friday up to 4pm due to junior priority evening)	£125	£115	£12.50
FULL TIME STUDENT (aged 18 to 25, living away from home, playing in university holidays only)	£60	£55	£6.00
SOCIAL / NON-PLAYING	£20	£20	£2.00
PARENT/ GUARDIAN (playing tennis with own child/children only)	£80	£70	£8.00
COUPLES (2 seniors residing at same address)	£350	£340	£35.00
FAMILY (children must be under 18)	£370	£350	£37.00

If you are currently experiencing financial difficulties and feel unable to pay this year's subscription, please write to David Summersgill (at the address below) outlining your situation and the committee may be able to offer assistance. All information will be treated confidentially.

### ADULT MEMBERSHIP APPLICATION FORM

Please complete the following details for all applicants. Under 18's must also complete separate form overleaf.

FULL NAMES	Date of Birth	British Tennis Membership Number*	Subscription
1 _____	____/____/____	_____	£ _____
2 _____	____/____/____	_____	£ _____
3 _____	____/____/____	_____	£ _____
<b>TOTAL SUBSCRIPTION</b>			<b>£ _____</b>

Cheque  
 \*\* Online: Sort Code 01-05-51 Acc. No 47723939  
 \*\* Standing Order: Sort Code 01-05-51 Acc. No 47723939

\*If you have not registered as a British Tennis Member please register at [www.lta.org.uk/britishtennismembership](http://www.lta.org.uk/britishtennismembership)

\*\* Please include your name as a reference so that the club is able to identify your payment.

A shoe tag will be sent to you after receiving your subscription. Please wear your shoe tag when playing at the club or you may be required to pay a visitor's fee.

Address \_\_\_\_\_

Post code \_\_\_\_\_ Telephone \_\_\_\_\_

E-MAIL \_\_\_\_\_ Occupation/s \_\_\_\_\_

I/We agree to abide by the Memorandum and Articles of Association and the Rules of the Club.

Signature of payer \_\_\_\_\_ Date \_\_\_\_\_

#### ■ FOR NEW MEMBERS ONLY

Membership will commence on approval of this application at the next Committee meeting and will be notified to you by the Membership Officer. For new members, a proposer and a seconder may be required.

● If you do not wish your name to be included in the membership directory in the clubhouse, please tick here   
The database information is not passed on to other organisations.

Please send completed form and payment (cheques made payable to Brabyns LTC) and standing order form (if applicable) to:  
David Summersgill, The White House, 2A Cote Green Road, Marple Bridge, Stockport, Cheshire, SK6 5EH. Any queries please email David at [davids@brabynstennis.co.uk](mailto:davids@brabynstennis.co.uk) or alternatively phone him on 07703 360022 or 0161 427 9190.

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**1 April 2012 to 31 March 2013**



**Junior Membership Application Form**

**The form MUST be signed by a parent or guardian.**

Name (please print)			
Gender	Male / Female (delete as appropriate)	Date of birth:	
Address			
		Postcode	
Contact numbers:	Home	Mobile	
British Tennis Membership Number			

\*If you have not registered as a British Tennis Member please register at [www.lta.org.uk/britishtennismembership](http://www.lta.org.uk/britishtennismembership)

A shoe tag will be sent to you after receiving your subscription. Please wear your shoe tag when playing at the club or you may be required to pay a visitor's fee.

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

Name (please print)			
Address <i>(If different from above)</i>			
		Postcode	
Relationship to child			
Contact numbers:	Home	Mobile	Work
Email address			
Club Newsletters and other information will be sent out by e-mail where possible. If you wish to receive your copy by post please tick here.			<input type="checkbox"/>

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

Continue overleaf if necessary

**Parent/guardian declaration**

By signing and returning this form, I agree to the above named child 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, a copy of which has been sent to me.

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.

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

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

**Please return the form and payment to:-**

David Summersgill, The White House, 2A Cote Green Road, Marple Bridge, Stockport, Cheshire, SK6 5EH. Any queries please email David at [davids@brabynstennis.co.uk](mailto:davids@brabynstennis.co.uk) or alternatively phone him on 07703 360022 or 0161 427 9190.