

TURKS & CAICOS ISLANDS TENNIS FEDERATION TCITF

MEMBERSHIP APPLICATION FORM 2016

Please return to TCITF Secretary: email : tennis@tcitf.org or cell no. 431-8367

CLASSES OF MEMBERSHIP 2014

- | | |
|--------------------------------------------------------------------------|------------|
| 1. Senior Playing Member (18 years of age and over) | \$350/year |
| 2. Family Member (2 adults + 2 juniors) | \$900/year |
| 3. Junior Member (6-17 yrs of age) | \$150/year |
| 4. Student Member (18+ years of age and involved in full-time education) | \$250/year |

NAME	D.O.B	CLASS	AMOUNT
	M / D / YR	#	\$
	M / D / YR	#	\$
	M / D / YR	#	\$
	M / D / YR	#	\$
	M / D / YR	#	\$
TOTAL		\$	

- Would you like coaching? List names and member type and age if junior:

NAME	MEMBER TYPE	D.O.B
		M / D / YR
		M / D / YR
		M / D / YR

Address (It is important that all members complete this section to ensure that the club's records are accurate. Please include your current email address to ensure you receive the Club's updates/newsletters.)

Name: Tel No: Cell No:

Address:

Email Address:

SIGNATURE:

DATE: M / D / YR

(Print Name):