



MT MAUNGANUI TENNIS CLUB INC
 PO BOX 4194, Mt Maunganui 3149



Application for Membership 2011 - 2012

I wish to APPLY for membership or to RENEW membership

*First Names:		*Surname:	
*Gender: Male <input type="checkbox"/>	Female <input type="checkbox"/>	Birth Date: children only	*Member Type:
Address:			
Suburb:		Town or City:	Post Code:
Phones: Home:		Mobile:	
Email:			

Family members included in membership				
*Name	*M/F	Birth Date children only	Mobile Phone	*Member Type:
		____/____/____		
		____/____/____		
		____/____/____		
		____/____/____		

PRIVACY see paragraph 7 of the Membership Declaration (overpage)

* Name, Gender and Member Type will be passed to your Regional Centre and Tennis NZ

Tick if you **do not** wish any of your other details to be sent to your Regional Centre and Tennis NZ

Tick if you **do not** wish your name and phone number to be made available to other club members

Tick if you **do not** wish your name to be included on Club day Duty Roster

NEW MEMBERS You will help us build a better club by answering this. (e.g. Live nearby, Coaching, Grasshoppers, Friends belong)

Why did you decide to join our Club ?

MEMBERSHIP FEES (includes Regional and Tennis NZ affiliation fees and GST)				
MEMBERSHIP TYPES and FEES Calculation				
Member Type	Fee	Qty	Total	Description
Senior	\$210			Adult full member
Junior under 12	\$85			Under 12 as at 1/10/2011
Junior 12-18	\$85			12 and over as at 1/10/2011
Life Member	\$50			
County	\$110			Affiliated to another club and resides 35km from the club
Family	\$490			Only use if fees would otherwise be greater than \$490
Total:				Our Bank account No is 031547 0001458 00
Email:				
Signature:		Date: ____/____/____		

CLUB USE ONLY	
Signature: _____	Date: ____/____/____
Receipt No: _____	Database Updated: <input type="checkbox"/>