



MEMBERSHIP FORM 2018 – 2019

Please enter all details, including dates of birth.

Ages are for membership type and tournament placement only, and are not for publication. * = **Required field**

More information at www.wanaka-tennis.net.nz 'About The Club' - Membership tab.

*Last name(s): _____ *First name of each family member: _____ *Gender: _____

_____ *(d.o.b.) / / M / F

_____ *(d.o.b.) / / M / F

_____ *(d.o.b.) / / M / F

_____ *(d.o.b.) / / M / F

_____ *(d.o.b.) / / M / F

*Email Address _____

Mailing Address _____

Local Address (If different from above) _____

Phone (Local) _____ Mobile _____ Other _____

Are you affiliated as a member of another club? (If so, which club) _____

NZ Tennis affiliation fees: Pee Wee - NIL, Juniors 8 - u12 yrs \$4, Intermediate 12 - u18 yrs and Seniors \$16

A Southern Region levy of \$4 per senior player. All fees and levies are included below.

Subscription Type (ages as at 1 Oct 2018)	Member Type	Rate	Qty	Totals
Pee Wee (under 8)	Junior	Free		\$
Junior – 8 years to less than 12 years	Junior	\$50.00		\$
Intermediate – 12 years to less than 18 years	Intermediate	\$65.00		\$
Senior (18 years and over)	Senior / Vet / Svet	\$160.00		\$
Family (Living at same address, children < 18 yrs)	Any, max 2 adults	\$350.00		\$
Holiday Family (Non-resident holiday users)	Any	\$175.00		\$
Holiday Senior (Non-resident holiday users)	Senior / Vet / Svet	\$80.00		\$

Optional Member Electronic Gate Entry Card \$20 deposit (refundable on return of card) \$20.00 \$ _____

Electronic Entry Card de-activated if sub not renewed by 31 Dec 2018

DATE: / / Indicate: CASH CHEQUE ON-LINE TOTAL ENCLOSED: \$ _____

Direct Credit Account No. 03 1739 0005576 01 If paying online (preferred) provide Family name in Reference

SUBS DUE 7 OCTOBER 2018 PLEASE PAY BY 7 DECEMBER 2018 TO RETAIN MEMBERSHIP PRIVILEGES

Treasurer: Geoff Hatten P O Box 476, Wanaka [gjhaten11@gmail.com](mailto:gjhatten11@gmail.com)

Please indicate which of your contact details can be published at the club with your First & Last Name/s and membership type (Tick) Email Address Mobile Home Phone

Office use only: From No..... Payment Type cash / cheque / DC

Member No.: Date Processed: / / Date Banked: / /