



Membership Application Form For the year 1st April 2009 to 31st March 2010

www.uskathleticclub.co.uk/tennis



Subscriptions - Categories of Membership	Inc. St David's Hospice Lottery	Pre 15th May	After 15th May
Full Family Membership (Tennis/Cricket/Football,Netball)	<input type="checkbox"/> @£25.00 per entry	<input type="checkbox"/> £236.00	<input type="checkbox"/> £261.00
Full Adult Member (Tennis/Cricket/Football,Netball)	<input type="checkbox"/> £172.00	<input type="checkbox"/> £147.00	<input type="checkbox"/> £172.00
Family Membership (Tennis Only)	<input type="checkbox"/> @£25.00 per entry	<input type="checkbox"/> £180.00	<input type="checkbox"/> £205.00
Adult Membership (Tennis Only)	<input type="checkbox"/> £140.00	<input type="checkbox"/> £115.00	<input type="checkbox"/> £140.00
Junior Membership (11- 18 years) and Students (Tennis Only)	<input type="checkbox"/> £ 60.00	<input type="checkbox"/> £ 35.00	<input type="checkbox"/> £ 60.00
Mini Junior Tennis (10 years and under)	<input type="checkbox"/> £ 35.00	<input type="checkbox"/> £ 10.00	<input type="checkbox"/> £ 35.00

The above fee includes 1 adult to play with child during the Mini Tennis session

Existing members: A £25 penalty (see listing above) will be levied on all types of subscription if not received by 15th May 2009.

New members : Family, Adult and Junior subscriptions for new members joining between 1st April and 30th September will be charged at the full rate. This fee will be applied on a monthly pro-rata basis, thereafter.

Usk Tennis Club is a supporter of British Tennis and will register all members free of charge. Should you not wish to participate please tick the box provided



ADULT MEMBERSHIP APPLICATION SECTION

First Name	Middle Name/s		Surname
Address			
Contact Telephone Numbers	Home		
	Mobile		
E-mail address			

JUNIOR MEMBERSHIP APPLICATION SECTION

Name (please print)		Date of Birth :	/	/
Gender	Male / Female (delete as appropriate)			
Address	If not already completed in Adult section			
Contact Telephone Numbers	Home			
	Mobile			
E-mail address				
<p>Medical Information</p> <p>Please use this box below to describe any special care needs, dietary requirements, allergies or medical conditions</p>				

Name (please print)		Date of Birth :	/	/
Gender	Male / Female (delete as appropriate)			
Address	If not already completed in Adult section			
Contact Telephone Numbers	Home			
	Mobile			
E-mail address				
<p>Medical Information</p> <p>Please use this box below to describe any special care needs, dietary requirements, allergies or medical conditions</p>				

Name (please print)		Date of Birth :	/	/
Gender	Male / Female (delete as appropriate)			
Address	If not already completed in Adult section			
Contact Telephone Numbers	Home			
	Mobile			
E-mail address				
<p>Medical Information</p> <p>Please use this box below to describe any special care needs, dietary requirements, allergies or medical conditions</p>				

Name (please print)		Date of Birth :	/	/
Gender	Male / Female (delete as appropriate)			
Address	If not already completed in Adult section			
Contact Telephone Numbers	Home			
	Mobile			
E-mail address				
Medical Information Please use this box below to describe any special care needs, dietary requirements, allergies or medical conditions				

Consent – Photography and filming

I give permission for me / my child / my children (delete as applicable) to be involved in any publicity (including photographs/TV footage) surrounding the activities of Usk Tennis Club which will be supervised under the LTA / Clubmark Guidelines (these are available for viewing and download on the Usk Tennis Club website).

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.

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

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

Name:.....



As you will see overleaf Usk Athletic Club are offering all members the opportunity to support a superb local charity and help with the fundraising activities of the club with the added bonus of the chance of winning a substantial cash prize. When returning your application form please just make your cheque out for the amount in the **blue column or if you are applying for family membership @ £25.00 per entry** and post it to the address below.

- Each £25.00 entry will buy 1 place in the Usk Athletic Club 2009 Lottery Syndicate A.
- All places will receive equal shares in any payout.
- Usk Tennis Club receives an affiliate fee from St David's for each entry.



If you wish to be included in the Usk Tennis Club ballot for Wimbledon Tickets (**Tennis Membership required**) please tick the box below **All entrants must be members of British Tennis**.

I wish to be included in the Usk Tennis Club Wimbledon Ticket ballot

Usk Tennis Club would like to be able to communicate with all of its members by e-mail and occasionally by text messaging to allow it to give details of court bookings, events, coaching schedules, changes to arrangements, member offers etc. To do this we require your positive confirmation that we have permission to do so. By ticking the box below you will confirm that permission has been granted. If at any time you no longer wish to receive e-mail from us simply send an e-mail titled No More Info to: **tennissecretary@uskathleticclub.co.uk**

Usk Tennis Club takes its responsibilities under Data Protection and Data Privacy laws seriously and will not share your data with any third parties without your prior permission.



I confirm that I would like to receive regular updates about club activities via e-mail (tick box)

Membership Application Checklist

- Completed membership sections as applicable?
- Ticked box (above) to receive regular e-mail updates about club activities?
- Signed photo consent permission? - **all applicants**
- Signed parent / guardian declaration if any applicants are under 16 years of age?
- Returned form and enclosed payment to the address below?

Job Done ✓

**Please return this form and your cheque made payable to Usk Athletic Club to;
Jennie Parsons, Willowbrook, Llantrissant, Usk, Monmouthshire, NP15 1LG
Telephone : 01291 672770**