

RATHGAR TENNIS CLUB

JUNIOR APPLICATION / RENEWAL FORM



FOR OFFICE USE ONLY

Amount Date Memb. No.
FOB No Letter Database

MEMBERSHIP DETAILS

Name: _____ Boy/Girl: _____

Full Address: _____

Date of birth: _____ Juniors Mobile Phone: _____
If over 12 and with guardian's consent

Guardians details:

Name: _____ Home Phone: _____

E-mail: _____ Mobile: _____
Contact email of Junior or Guardian

TENNIS STANDARD

Beginner Social League (League levels last played)

CLUB MEMBERSHIPS

(Previous membership of Rathgar or any other club and last year of membership)

I wish to apply for membership and agree to abide by all of the rules and regulations of Rathgar Tennis Club:

Signature of Applicant: _____

Signature of Guardian: _____ Date: _____

Cheques should be made payable to Rathgar Tennis and Bowling Club and addressed to:

Membership , Rathgar Tennis Club, Herzog Park, Rathgar, Dublin 6

The following 3 signed documents should accompany this application:

Code of Conduct Parents, Code of Conduct Children, Medical Consent Form

These documents can be downloaded from the "Fees & Forms" page on the Club website

Enquiries: rathgartennis@eircom.net

Website: www.rathgartennis.com

Phone: 01 4902082

Mobile: 087 2330749