

Box Hill Tennis Club Inc.

ABN 97 539 412 692 Reg No A0019963F CORNER CYRIL & STATION STREET, BOX HILL SOUTH 3128

Web: www.tennis.com.au/boxhilltc
Email: boxhilltennisclub@gmail.com

President: Jan-Paul Buxton
Secretary: Simon Clarke
Vice-President: Richard Scott
Treasurer: Simon Verbeek
Membership: Ros Cornish

APPLICATION FOR MEMBERSHIP

	(Me	embership Yea	ar: 1 JULY 2023–30 JUNE 2	2024)			
Surname:		Given N	Names:				
Address:			Suburb:	P/Code:			
Mobile:		Ema	ail:				
Occupation: Date of Birth:							
PLAYING STANDARD: ☐ Beginner ☐ Experienced Club Player		0	Occasional Social Player Competition Standard (Grade	played:)			
Is Box Hill Tennis C If not, please nominand provide your Te	ate your Prima	ary Club					
SCHEDULE OF FEES:							
FEE Category	Total Fee*	Benefits					
☐ Adult	\$195	Can play in all	competitions and tournaments.	Unlimited court access for social play.			
Student	\$125	Full-time student between18 and 25 years (copy or scan of student card required.) Can play in all competitions and tournaments. Unlimited court access for social play.					
Junior	\$150	Junior (18 years or under) can play both in junior and senior teams. Unlimited court access for social play. Membership includes ball and entry fees for ERT winter and summer seasons.					
☐ Family	\$480	For family members living at the same address with a maximum of 3 adults, 2 adults and 2 or more children or 1 adult and 3 or more children. Please list all details overleaf. Conditions are as for adult and junior memberships.					
□ 2023 Pennant	\$55	One off payment for membership during pennant season ONLY.					
*All memberships include PAYMENT	the Tennis V	ctoria Insurance	Levy.				
Do not send payment no payment details.	w. If your men	nbership applicati	ion is approved, Box Hill Tennis	Club will invoice you and provide			
PRIVACY Our privacy policy regard	ling informatio	n collected on thi	is form can be found at https://pl	ay.tennis.com.au/boxhilltc/Membership.			
DECLARATION (One pe	erson to sign o	n behalf of a fam	ily)				
I hereby apply to join the Box Hill Tennis Club Inc. as a (insert type) Member and agree to abide by the By-Laws and Rules of the Tennis Club. I note the Club's requirements to wear correct tennis attire, to properly bag the courts before each set and to pay visitor fees for any non-members with whom I hit.							
Signed:			Date				

Please return this form to: boxhilltennisclub@gmail.com OR The Membership Officer, Box Hill Tennis Club, 3 Cyril St, Box Hill South.

FAMILY MEMBERSHIP DETAILS

Seconded: Signed:

Name	Date of Birth	Email	Mobile			
If any members are tertiary students, please provide a colour copy of their student ID card.						
FAQs						
Pro-rata membership payment						
Membership is for 12 months from the date of joining or renewal.						
COMMITTEE APPROVAL						
Approved: Signed:		Date				

Date _____