



Clontarf Parish Tennis Club

St. John's Church Parish Centre,
Seafield Road, Dublin 3



Membership Application Form

1 April 2011 – 31 March 2012

Name/s (Block Capitals): _____

Address: _____

Home Phone: _____ Mobile Number: _____
Mobile Number: _____

Email address/es: _____ / _____

If joining for the first time, where did you hear about our club? _____

Type of Membership (please tick):

Family (€330): Senior (€165): *Student (€65):
(covers three children under 18 yrs)

Junior 16 (€65): Pavilion (€30): **Junior (€10):

**Student applications must be supported by copy of a student card*

If Family/Junior Membership, please fill out children's details below:

Name	Date of Birth

In making this application I/we agree to be bound by the rules of the Club.

Signature: _____ Date: _____

Signature: _____ Date: _____

Please return this form and appropriate cheque, made out to Clontarf Parish Church L.T.C. to: Emma Stanley, Membership Secretary, 30 St. Margarets Ave, Raheny, Dublin 5. Tel: 086 8748265

For New Members only

Membership Proposed by: _____ Seconded by: _____

Date: _____