

JUNIOR FULL YEAR MEMBERSHIP

Name(s):						
Address:		City:	Po	Postal Code:		
Phone number:	Email:					
☐ Do Not Send Me	essages Regarding Cl	ub Activities (check-c	off only if tha	at is your choic	ce)	
Note that all contac	t and league sign-ı	ips will be done by	email.			
Important: Each Junio	or member must sign	the waiver along wi	ith a signatur	re of the Parer	nt /Guardian	
Waiver:						
Aldershot Tennis Club						
Booking Procedures, C						
families, heirs and succ						
property sustained by a however such injury or						acilities of ATC,
- '		-				
Junior #1:				ilioi #3		
Signature of Parent/G	luardian·		Date:			

Junior Membership Details and Fees

Junior full year membership (under 18 years of age as of January of current year).

Restricted hours of play: 7:00 a.m. – 5:30 p.m. Mon - Fri, 1:00 p.m. – 9:00 p.m. Sat/Sun

May play anytime when playing with a registered adult member. \$225 + HST: \$254.25

Saturday Match Play

Organized competition and instruction every Saturday $4:00 - 5:30 \, \text{p.m.}$ and $5:30 - 7:00 \, \text{p.m.}$ through the Fall/Winter season (except holidays and tournament weekends).

Match Play Ability is a requirement. \$160 + HST: \$180.80

Payment Details

Payment by cheque (can be post-dated to October 1st) or money order (cash **not** accepted). Debit payments can be made at the clubhouse when Board members are present. Drop in dates will be set up to allow members to come to the clubhouse to pay by debit. Completed forms and cheques/money orders are to be mailed to:

Aldershot Tennis Club – Membership Maplehurst P.O. Box 71112, Burlington, ON L7T 4J8