



Tennis Seniors Victoria

ABN 17 737 124 493 Reg No A14023F

PATRON: Judith Dalton
PRESIDENT: Paul Kleverlaan
TREASURER: Robert Hughes

Correspondence to:
SECRETARY: Judy Collins
PO Box 384
DINGLEY VILLAGE Vic 3172
Phone/Fax: +61 3 9551 2815
Email: vicsecretary@tenniseniors.org.au

www.tenniseniorsvictoria.com.au

PROPOSAL FOR MEMBERSHIP

Please consider the following application for membership at your next meeting:

NAME IN FULL: (Mr Mrs Miss Ms.) _____

RESIDENTIAL ADDRESS: _____

_____ **POST CODE:** _____

POSTAL ADDRESS: _____

_____ **POST CODE:** _____

CONTACT DETAILS: PHONE _____ **FAX:** _____

MOBILE: _____ **DATE OF BIRTH:** _____

E-MAIL: _____ **WORKING or RETIRED?** (Circle one)

I am willing to receive correspondence electronically Yes / No

EMERGENCY CONTACT NAME _____ **CONTACT NUMBER** _____

I AM WILLING TO BE INCLUDED IN A MEMBERSHIP PHONE LIST YES/NO

OCCUPATION (if working): _____

I AM, OR HAVE BEEN, A MEMBER OF THE FOLLOWING TENNIS CLUBS:

GRADE/SECTION PLAYED	CLUB/ASSOCIATION/DISTRICT	GRADE/SECTION PLAYED	CLUB/ASSOCIATION/DISTRICT

Please print the **full** names of your proposer and seconder

To be completed by proposer: I have known the candidate for years and I believe he/she would be an asset to Tennis Seniors Victoria

PROPOSER _____ **Signature** _____

SECONDER _____ **Signature** _____

TENNIS VICTORIA PLAYER REGISTRATION NUMBER – *Issued by Tennis Victoria*

Signature of Applicant _____ **DATE:** _____

Please forward the completed form (signed by Proposer and Seconder), together with the appropriate fee as designated in the accompanying Table, to the Secretary at the address shown overleaf. Cheques should be made payable to Tennis Seniors Victoria.

