



# ALBANY TENNIS CLUB

## MEMBERSHIP APPLICATION

Please fill out this form **completely** and **legibly**. Check the box for the appropriate category below.

| <u>CATEGORY</u>   | <u>PRICE</u>                      | <u>30-DAY</u>                    |                  |
|-------------------|-----------------------------------|----------------------------------|------------------|
| <b>INDIVIDUAL</b> | <input type="checkbox"/> \$230.00 | <input type="checkbox"/> \$60.00 | Start Date _____ |
| <b>COUPLE</b>     | <input type="checkbox"/> \$345.00 | <input type="checkbox"/> \$80.00 | Start Date _____ |
| <b>FAMILY</b>     | <input type="checkbox"/> \$390.00 | <input type="checkbox"/> \$90.00 | Start Date _____ |
| <b>STUDENT*</b>   | <input type="checkbox"/> \$115.00 | NA                               |                  |
| <b>JUNIOR**</b>   | <input type="checkbox"/> \$50.00  | NA                               |                  |

Starting July 1, ATC is offering 30-day memberships for the rest of the season. Each membership will run for 30 days, except a membership purchased September 1 or later will be valid until the end of the season. Complete this membership form and hand it in to an attendant at the courts along with your payment. Mail-ins will not be accepted. Pay the attendant and play right away.

\* Students are college or graduate students.

\*\*Juniors are high school students or younger. Does not include any tournament entry fees.

Membership fees include 8% sales tax are non-refundable.

Individual memberships receive 2 guest passes. Couple and Family memberships receive 3 guest passes.

It is important that you include your **email address** so we can keep you informed of Club activities. It is our preferred method of communicating with you.

We provide a membership list to all members, which includes names, phone numbers and email addresses. Note below any information that you do not want included on this membership list.

|  |                                     | <b>Do Not<br/>Include</b> |
|--|-------------------------------------|---------------------------|
| <b>Name:</b>                                 |                                     | <input type="checkbox"/>  |
| <b>Email:</b>                                |                                     | <input type="checkbox"/>  |
| <b>Phone:</b>                                | Home: _____ Work: _____ Cell: _____ | <input type="checkbox"/>  |
| <b>Name:</b>                                 |                                     | <input type="checkbox"/>  |
| <b>Email:</b>                                |                                     | <input type="checkbox"/>  |
| <b>Phone:</b>                                | Home: _____ Work: _____ Cell: _____ | <input type="checkbox"/>  |
| <b>Address:</b>                              |                                     |                           |
|  |                                     |                           |
| <b>Additional Names (Family Membership):</b> |                                     |                           |
|  |                                     |                           |

*Mail completed form and check to: Albany Tennis Club  
P.O. Box 3052  
Albany, NY 12203*