



GREENACRES TENNIS CLUB INC.

'Home of the Dragons'



Social Member Registration Form	
Title:	<input type="checkbox"/> MR <input type="checkbox"/> MS <input type="checkbox"/> MRS <input type="checkbox"/> MISS <input type="checkbox"/> OTHER (please specify)
First Name:	
Last Name:	
Gender:	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
Date of Birth:	
Mobile Phone:	
Email Address:	
Address	
Address:	
Suburb:	
Postcode:	
State:	
Emergency Contact Details	
Full Name:	
Mobile Phone:	
Relation:	
<i>It is ESSENTIAL to provide current email/phone contact information for both you and your emergency contact. Please notify the GTC Secretary of any changes</i>	
Player Medical Conditions	
Do you have any medical conditions that the club needs to be aware of? Please circle: Yes / No	
If Yes, please specify:	
AGREEMENT	
I agree that I, named above, will abide by the constitution and by-laws of the Greenacres Tennis Club Inc, North East Tennis Association Inc and Tennis SA. In signing this membership agreement, I accept that personal injury is not covered by Greenacres Tennis Club and I use the facilities at my own risk.	
I have read and received a copy of the GTC Code of Conduct	<input type="checkbox"/> Yes <input type="checkbox"/> No
SIGNATURE:	DATE:

All correspondence is sent to members via email. Please email greenacrestc@gmail.com with any change to contact details

**All GTC Policies can be found on our website – <https://greenacrestc.wixsite.com/greenacrestc> **

