

St. Kevin's Tennis Club Inc.

Herlihy's Road, Lower Templestowe Vic. 3107
 Correspondence to: PO Box 39, Bulleen Vic. 3105
 www.stkevinstctemplestowe.org.au @ admin@stkevinstctemplestowe.org.au

REG. NO. A0033358J
 ABN. 76 190 887 984

President: Paul Polidano
 9846-2083

Secretary: Dianne Spinosa
 0407 323 785



Membership Secretary
St Kevin's Tennis Club Inc
P.O. Box 39
BULLEEN VIC 3105

Date:/...../.....

Membership Application Form 2020/2021

I wish to make application to join St Kevin's Tennis Club Inc. and agree to be bound by the rules of the Club/Association

<u>Membership Commencing</u>	<u>On or After 1st May</u>	<u>On or After 1st Aug</u>	<u>On or After 1st Nov</u>
<input type="radio"/> Family Category (Insurance Levy Inc.)	\$230	\$180	\$110
<input type="radio"/> Adult (Over 21 Yrs of Age. Insurance Levy Inc.)	\$160	\$110	\$75
<input type="radio"/> Junior /Student (Insurance Levy Inc.)	\$ 85	\$65	\$45

Please "tick" (✓) Category required and enclose a cheque/money order for subscription amount as indicated below:

Total Fee enclosed \$.....

To pay via EFT, the Club Banking details are :-

Name of Account : St Kevin's Tennis Club Lower Templestowe

BSB No.: 633 000 **Account No.:** 168 384 493.

Please ensure to enter Payee details when transferring membership fee as well as emailing the club at admin@stkevinstctemplestowe.org.au when completing transaction for payment verification.

NAME D.O.B /...../.....

ADDRESSSUBURB.....POST CODE

TEL MOB..... EMAIL
 (Imperative for Contact and Member Insurance purposes)

Please list names of all Family Category Members

(Imperative – as otherwise will not be registered as Member of Club nor covered by Insurance)

..... /...../..... M / F /...../..... M / F /...../..... M / F
 /...../..... M / F /...../..... M / F /...../..... M / F
 /...../..... M / F /...../..... M / F /...../..... M / F

Signature of Applicant..... **Date**/...../.....

Proposer - I being a member of the St Kevin's Tennis Club, nominate the applicant, who is personally known to me, for membership of the club

Signature of Proposer..... Name.....Date.....

If unable to complete this Section please leave blank

***Notes**

- A full time student still living at home at his / her parent's home can remain covered by a family membership beyond the age of 21 years.
 - Both Family and Adult subscriptions fees shown above include a "Maintenance levy of \$20.00.
 - Consent for Club to divulge Name and email details to Tennis Victoria for member registration including Insurance Purposes.
- (Unless opting out by ticking STKTC is required to divulge these personal details of all club members to Tennis Vic for Insurance covered purposes)

Your application will be submitted to the committee, which meets 1st Monday each month - thus some delay may occur prior to acceptance of membership.

Office use

Entered Online	Initials	Email sent	Payment Rec'd	Payment Method:	Key sent
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