

TEMECULA TEAM TENNIS

FAMILY MEMBERSHIP FORM

Family last name: _____

How many members in your Family? _____

Family address: _____

City: _____ State: CA. Zip code: _____

List all family members under this membership

#1 Name: _____ (Please circle) Male / Female

Phone: H# _____ Cell# _____ Wk# _____

USTA ID # _____ USTA Rated? Yes / No What Level? _____

Email address: _____

#2 Name: _____ (Please circle) Male / Female

Phone: H# _____ Cell# _____ Wk# _____

USTA ID # _____ USTA Rated? Yes / No What Level? _____

Email address: _____

#3 Name: _____ (Please circle) Male / Female

Phone: H# _____ Cell# _____ Wk# _____

USTA ID # _____ USTA Rated? Yes / No What Level? _____

Email address: _____

If more than 3 members in the family, please print out another Page 1 and continue to list family members and attached to application.

Please check all items that apply:

- New TTT Family Membership
- Renewal of TTT Family Membership

Please check age groups that apply to your family:

- Under 10 years old 30-50 years old
- 10-18 years old 50-60 years old
- 18-30 years old Over 60 years old

What are you all Interested in?

- Adult USTA Teams
- Junior USTA Teams
- Casual play only
- Group lessons/clinics
- Private lessons
- Children's tennis
- Other : _____

AMOUNT DUE: **\$130.00 per family per year.**

PAYABLE TO: **TEMECULA TEAM TENNIS INC.**

MAIL TO:
TEMECULA TEAM TENNIS
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