

2012 Wailea Tennis Club Membership Application

(PLEASE PRINT)

Full name of applicant(s):

(Primary Member) _____ DOB (mm/dd): _____

(Spouse) _____ DOB (mm/dd): _____

(Child) _____ DOB (mm/dd/yy): _____

(Child) _____ DOB (mm/dd/yy): _____

Maui address: _____ Maui phone: (808) _____

_____ Cell phone: (____) _____

Permanent address: _____ Home phone: (____) _____

_____ Email: _____

Would you like your name and phone number to be included in the member directory, which will be available to all club members? Yes No

Each applicant has read and agrees to the terms and conditions of this membership application form, and further agrees to abide by all policies, rules and regulations now or hereafter adopted by Wailea Tennis Club.

Applicant's signature: _____ **FEE COLLECTED:** \$ _____

Circle One:

Family: [Annual \$1,500 or \$150/mo.] [6 mo. \$1,000] [3 mo. \$625] [Monthly \$450] [Weekly \$200]

Individual: [Annual \$1,000 or \$100/mo.] [6 mo. \$625] [3 mo. \$375] [Monthly \$225] [Weekly \$100]

Junior: [Annual \$500]

Note: Annual membership paid in monthly installments must be paid by credit card on file and member agrees to pay 12 consecutive monthly installments.

Name on Credit Card: _____ Signature: _____

CC #: _____ CC Type: _____ CVV# _____