

ST BUDEAUX TENNIS CLUB

APPLICATION FOR MEMBERSHIP

Year

Name in Full:

Address:

Post Code: _____

Telephone Number: _____

E-Mail Address:

Date of Birth: _____

Are you in full time Education or on a Training course YES /NO

Give details of your playing ability or if you have one your LTA rating:

SUBSCRIPTIONS

See Website for latest prices

www.stbudeauxtennisclub.co.uk