



APPLICATION FOR MEMBERSHIP OF
EASTERN REGION TENNIS Inc.
A0031930C ABN 95 114 479 848

We the Committee of -Tennis Club
desire to become a Member of Eastern Region Tennis Inc. In the event
of our Application being accepted, we agree to be bound by the Rules of
the Association that are in force at the time of this application.

PRESIDENT – (Block letters)

Name

Email Address

Phone/Mobile

SECRETARY – (Block letters)

Name

Email Address

Phone/Mobile

TREASURER – (Block letters)

Name

Email Address

Phone/Mobile

Please fill out the following Club details –

Postal Address (P.O. Box if applicable)
..... Post Code

Email Address

Bank details - BSB Account

Court Details –

Address of Club courts
.....Post Code

Melway Ref: Phone number (if applicable)

Number of Courts Surface Lights - Yes/No
Number of Courts Surface Lights – Yes/No

MULTI LINED COURTS ARE NOT ALLOWED.

Outside Venue (If applicable) –

Address of courts
.....Post Code

Melway Ref: Phone number (if applicable)

Number of Courts Surface Lights - Yes/No
Number of Courts Surface Lights – Yes/No

MULTI LINED COURTS ARE NOT ALLOWED.

Previous Association Junior teams – Yes/No
Senior teams – Yes/No

Previous Seasons played

To be accepted as a Member of Eastern Region Tennis Inc, a club MUST provide a Club house/Shelter, Drinking Water and toilet facilities.

PLEASE COMPLETE THE FOLLOWING-

Are you Affiliated with Tennis Victoria - Yes/No

Is your Club incorporated - Yes/No

Do you have a Club House/Shelter - Yes/No

Do you have fresh drinking water - Yes/No

Do you have toilet facilities - Yes/No

Do you have Public Liability insurance - Yes/No
(Copy of Certificate to be sent with this form)

Please return the form to ert_junior@ertinc.org.au