

# MEMBERSHIP FORM 2025/26

Lot 84, Viking Street  
Kingscliff NSW 2487

ABN 20 658 869 343



ANNUAL MEMBERSHIP <i>1<sup>st</sup> February 2025 to 31<sup>st</sup> January 2026</i>	NEW MEMBERS	RENEWING MEMBERS	CASUAL MEMBERSHIP <i>From date application is accepted</i>	
ADULT – SINGLE	\$150	\$125	3 MONTHS	\$75
FAMILY – 2 ADULTS	\$250	\$220		
FAMILY – 2 ADULTS / 2 CHILDREN	\$280	\$250		
JUNIOR – UNDER 18	\$60	-		
COMPETITION ONLY	\$75	-		

**LIMITED TIME DISCOUNT FOR RENEWING MEMBERS**  
Completed form and payment to be received before 31-Jan-25

- 🎾 All memberships (excluding Competition Only) include free daytime court hire which is booked via [www.kingsclifftennisclub.com.au](http://www.kingsclifftennisclub.com.au)
  - *Non-members playing with members will need to pay a portion of the court hire fee. E.g. non-member playing singles with a member pays \$7ph; non-members playing doubles with a member pay \$3.50pp per hour.*
- 🎾 All members will be registered with Tennis NSW and will automatically have insurance cover
- 🎾 Please visit [www.kingsclifftennisclub.com.au](http://www.kingsclifftennisclub.com.au) for terms and conditions
- 🎾 Please note that all memberships are non-refundable

<b>Social Tennis</b>	Members	\$2	Non-members	\$10
<i>see website for days/times</i>				

## Payment details

Bank: Commonwealth Bank  
 BSB: 062 673  
 Account Number: 1003 8410  
 Account Name: Kingscliff Tennis Club Incorporated  
 Reference: Full name and membership number (if known)

**MONIES WILL NOT BE ACCEPTED UNTIL THE APPLICATION FORM IS COMPLETED**

### Office use:

Amount paid	\$	Date	Membership no.	Adult 1
				Adult 2
				Child 1
				Child 2

# MEMBER DETAILS

All details are required

PLEASE RETURN COMPLETED FORM TO

info@kingsclifftennisclub.com.au

## Mailing address

State \_\_\_\_\_ Postcode \_\_\_\_\_

## Adult 1 (or Parent/Guardian if Junior member)

Family name \_\_\_\_\_ First name \_\_\_\_\_

Date of birth \_\_\_\_\_ Telephone \_\_\_\_\_

Gender Male Female Other Email \_\_\_\_\_

## Emergency contact

Family name \_\_\_\_\_ First name \_\_\_\_\_

Relationship \_\_\_\_\_ Telephone \_\_\_\_\_

Email \_\_\_\_\_

## Adult 2

Family name \_\_\_\_\_ First name \_\_\_\_\_

Date of birth \_\_\_\_\_ Telephone \_\_\_\_\_

Gender Male Female Other Email \_\_\_\_\_

## Emergency contact

Family name \_\_\_\_\_ First name \_\_\_\_\_

Relationship \_\_\_\_\_ Telephone \_\_\_\_\_

Email \_\_\_\_\_

## Child 1 (Emergency contact for Child 1 will be Adult 1 unless otherwise advised)

Family name \_\_\_\_\_ First name \_\_\_\_\_

Date of birth \_\_\_\_\_ Telephone \_\_\_\_\_

Gender Male Female Other Email \_\_\_\_\_

## Child 2 (Emergency contact for Child 2 will be Adult 1 unless otherwise advised)

Family name \_\_\_\_\_ First name \_\_\_\_\_

Date of birth \_\_\_\_\_ Telephone \_\_\_\_\_

Gender Male Female Other Email \_\_\_\_\_