

# SEMAPHORE TENNIS CLUB INC WILLS STREET, LARGS BAY

## **To Prospective Members**

The purpose of the STC is to provide adequate facilities for its members to play social tennis and enjoy social gatherings (as per the Rules of Incorporation).

### Days of Play

Members may play tennis 7 days a week, with the proviso that at certain times organised groups viz. Saturday AM, Monday AM and during the week, will operate under varying conditions of play. It is expected that players wishing to join these groups abide by their rules of play.

# **Player Responsibilities**

Players are asked to treat the equipment and facilities with due care and display accepted standards of behaviour and sportsmanship both on and off the court.

#### **Visitors**

Members are most welcome to bring visitors to the club. If they then wish to come on a regular basis they will be expected to apply for club membership.

| ANNUAL FEE: \$50.00 PA. (Se                           | ason 1 <sup>st</sup> Nov to 31 <sup>s</sup> | st Oct)                                       |
|---|---|---|
| Direct payment to: BankSA                             | BSB 105 001                                 | Acct No 035027140                             |
| Please tear off (keep top half f                      | or your info)                               |   |
| <b>X</b>  |   |   |
|   | MEMBERSI                                    | HIP FORM                                      |
| I,of the Semaphore Tennis Club I                      |   | to apply for membership                       |
| ADDRESS   |   |   |
| PHONE(Hor   | ne)   | (Work)  |
| MOBILE  | EMAIL                                       |   |
| DATE OF BIRTH/  | /   |   |
| DO YOU WANT A GATE KEY                                | Y/N (at a cost o                            | f \$10.00 - at discretion of committee)       |
| For our records: if you suffer a be resuscitated? Y/N | a life-threatening i                        | ncident at the club do you give permission to |
| <b>Emergency Contact Details: N</b>                   | ame   | Phone No:                                     |
| Signature   |   |   |
| Date  |   |   |