



Applicant Information

Name

First Name

Middle Initial

Last Name

Address

Street

City/State

Zip

Alternate Address

Street

City/State

Zip

Contact Info. ()

Home

Mobile

E-mail

Membership Category

| | |
|---|--|
| <input type="checkbox"/> Individual US\$125.00 per year | <input type="checkbox"/> Junior Membership US\$70.00 per year |
| <input type="checkbox"/> Family Membership US\$250.00 per year | <input type="checkbox"/> Villa Membership US\$600.00 per year |

Family Membership: Please specify names

| | | | | |
|------------------|--|--|--|--|
| NAME | | | | |
| Contact # | | | | |

Please make cheque payable to: **Anguilla Tennis Academy**

Mail form and cheque to: **P.O. Box 548, The Valley, Anguilla AI2640**

Signature.....

Date.....