

2020 Membership Application

MOUNT PLEASANT TENNIS CLUB

117 - 4TH Avenue NE, Calgary, Alberta T2E 6K7

Phone: 403-276-3013

Website: mountpleasanttennis.ca

Last Name	First Name		
Phone number	Email		
Membership type: New	Renewal		
Membership Fe	es: (please, check a category and entrar	nce fee, if applicable)	
Adult: \$125.00	(* Entrance Fee \$25.0	00)	
Family (Adult & one junior): \$125.00	(* Entrance Fee \$25.0	(* Entrance Fee \$25.00)	
Senior (60 years+): \$75.00	(* Entrance Fee \$15.0	(* Entrance Fee \$15.00)	
Full Time Student**: \$75.00	(* Entrance Fee \$15.0	00)	
Junior (18 years and under): \$40.00			
* Entrance Fee applies to all applicants who have			
** Student is to be 25 or under with a valid stude	ent ID		
Full payment must accompany all application to the Membership Director.		•	· · · · · · · · · · · · · · · · · · ·
WAIVER: 1. I hereby apply for membership in the Mount Pleasant 2. I am bound by the MPTC's Constitution, By-Laws and I understand that if this is a Family membership application policies. 3. I agree to wear suitable tennis attire and proper, non-4. I will wear my shoe tag during the play to identify me 5. I agree that MPTC, its directors, staff, agents and their costs howsoever caused or sustained by me or any famil located. I release MPTC, its directors, staff, and agents a which I have had, now have, or shall hereafter have arisinany of my property while in or upon the premises of the 6. I agree that MPTC may reject or accept my application membership term at its sole discretion. 7. I understand that membership fees are non-refundab 8. I accept that MPTC activities have risks and I expressly 9. I acknowledge that due to COVID-19 pandemic there a. I along with my dependents will always become far recommendations by The Alberta Health Services b. My attendance or my dependents attendance at the Alberta Health Services 10. I confirm that I have read, understood and agree to I	Policies, and all relevant Tennis Canada national poon, each person named in the "Family" section of the marking footwear. as a Member. Theirs, executors and legal representatives will not by member, heirs and executors while at this facility and their heirs, executors and legal representatives ing out of or relating to any loss, damage or injury, MPTC or any premises under the control of MPTC or for membership but impose certain conditions or assume these risks. are additional health risks associated with attending miliarized and abide with MPTC's rules, policies and the club is my confirmation that I (we) have not expense.	be liable for any loss, damage or participating in any way in from any and all claims, dema including death that may have vary, suspend or cancel my m ried, suspended or cancelled) g and participating in activitie	e, injury, including death or any of our activity wherever ands, actions, whatsoever been sustained by me or nembership during the
Do you wish to receive email news from	the club:	Yes	No
Do you wish to have your contact info po		Yes	No
Signature:	Date:		
(Parent or Guardian if Junior)			
	MPTC USE ONLY		
Date Funds Received:	Amount:	_	
Payment Method (Check One): Cash			
Received by:			