**BTC Membership Application Form**

**Member Information**

\*Member #1 Name (First and Last)

\*Email Address

\*Primary Phone

Secondary Phone

\*Select Membership Type for purchase:



Member #1 is interested in the following club leagues (optional):



Member #1 is interested in the following InterCounty leagues (optional):



Select the following check box to express an interest in lessons with our club Pro:



**Additional Member Information** (up to 3 additional members)

\*Member #2 Name

Member #2 is interested in the following club leagues (optional):



Member #2 is interested in the following InterCounty leagues (optional):



\*Member #3 Name

Member #3 is interested in the following club leagues (optional):



Member #3 is interested in the following InterCounty leagues (optional):



\*Member #4 Name

Member #4 is interested in the following club leagues (optional):



Member #4 is interested in the following InterCounty leagues (optional):



**Waiver and Release**

The Ballantrae Tennis Club, its membership, executive officers, directors, instructors and the Town of Whitchurch-Stouffville is released and forever discharged from all claims and demands for damage, loss and/or injury, however arising, whether the result of bodily injury, death, or loss or damage to personal property, which may be sustained by the undersigned and all other applicants, resulting from participation in tennis or any related activity and consequences thereof.

I, and on behalf of any other person included under this membership, do hereby consent to the Ballantrae Tennis Club collecting, using or disclosing any of my personal information, or depiction or photographs of my likeness collected by or produced by the Ballantrae Tennis Club, for the specific purpose of promoting via its website or conducting club business, and further agrees to accept any invitation to join the Ballantrae Tennis Club mailing list group. The information provided by me in this registration application form is accurate.

The Ballantrae Tennis Club is committed to respecting your privacy. We do not sell or disclose your personal information to any outside commercial interest for marketing, solicitation or any other such purpose.

Date Signed (DD-MM-YYYY)



Payment Information:





VISA Number

Expiry Date (MM-YY)

CVV Code

Mailing address:

Ballantrae Tennis Club, P.O. Box 95091, Stouffville, ON L4A 1J1