



The Westacres Tennis Club

2022 REGISTRATION FORM

MEMBERSHIP INFORMATION *(Please complete and sign form)*

Adult Name: _____

Adult Name: _____

Junior Name: _____ Age _____

Junior Name: _____ Age _____

Junior Name: _____ Age _____

Address: _____

Phone: _____ email: _____

Are you interested in serving on Westacres Board? Check box and we'll get in touch.

PLEASE CHECK OFF APPROPRIATE BOX

- | | |
|---|--|
| <input type="checkbox"/> FAMILY - Two adults & all children (17 or under in 2021) \$150 | <input type="checkbox"/> ADULT - Age 18 or over \$80 |
| <input type="checkbox"/> SENIOR - Age 65 or over in 2022 \$50 | <input type="checkbox"/> JUNIOR - Age 17 or under in 2022 \$50 |

- | | | |
|--------------------------------|---|--|
| Summer Kids Camp: July 4-8 | <input type="checkbox"/> MEMBER \$150 X _____ | <input type="checkbox"/> NON-MEMBERS \$200 X _____ |
| Summer Kids Camp: August 15-19 | <input type="checkbox"/> MEMBER \$150 X _____ | <input type="checkbox"/> NON-MEMBERS \$200 X _____ |

TOTAL PAYMENT \$ _____

PAYMENT METHOD:

Please send completed form to:

Email: westacrestennisclub@gmail.com

Mail: 898 Johnathan Drive, Mississauga, ON L4Y 1J8

eTransfer (emailed to westacrestennisclub@gmail.com)

Cheque (payable to 'The Westacres Tennis Club')

PLEASE NOTE: Members 18 years and over have voting rights at the Annual General

City of Mississauga Community Tennis Club Guidelines and Protocols & Rules of Play: I hereby confirm having read and agree (or on behalf of my child) to abide by the City of Mississauga Community Tennis Club Guidelines and Protocols & Rules of Play attached to this registration form.

Code of Conduct & Ethics:

As a participant with the Westacres Tennis Club, I recognize and understand that there are certain expectations of all participants regarding their conduct and behaviour. I further understand that I (or my child) am required to abide by a Code of Conduct & Ethics, Club Policies, and any applicable rules and regulations established by the Club.

I hereby agree (or on behalf of my child) to abide by the Westacres Tennis Code of Conduct & Ethics, Policies, rules and regulations

Permission to Share My Personal Information:

As a member of the Westacres Tennis Club, I hereby authorize the Club to share my personal information to the City solely for the purpose of the Community Group Registry Program & other members of the Westacres Tennis Club, for the sole purpose of promoting participation in tennis activities at the Club. *Under the Privacy Act, the Westacres Tennis Club acknowledges it will safe guard and protect my personal information.*

NAME OF PARTICIPANT

SIGNATURE OF AGREEMENT

DATE

NAME OF PARTICIPANT'S PARENT/GUARDIAN
(IF THE PARTICIPANT IS UNDER 18 YEARS OLD)

SIGNATURE OF AGREEMENT
(PARENT/GUARDIAN)

DATE

Thanks to the City of Mississauga for their support



Registered
Community Group