

westmeadows tennis club SENIOR TENNIS EMERGENCY PLAYER FORM

PLAYER DETAILS (Please fill out all fields)	
Name	
Email	
Mobile	
TEAM DETAILS (Tick the relevant competition, and enter the grade and captain)	
Tuesday night ladies Wedn	esday night mixed Thursday ladies Thursday night mens
Grade Capta	in
GENERAL QUESTIONS (Please answer all of the below)	
Have you played tennis before? YES	NO
, , ,	
Would you be interested in hearing more about membership to the WTC? YES NO	
If you are interested in playing competition full time in the future, please tick the relevant competition(s) below:	
Tuesday night ladies Wedn	esday night mixed Thursday ladies Thursday night mens
Other	
Could we list you as an emergency contact for our teams? YES NO	
Could we list you as all elliergency contact for our tealis:	
How did you find out about competition tennis?	
DECLARATION	
All players who are playing competition tennis By signing this form, I agree to abide by all the Club Rules and By-Laws of the Westmeadows Tennis Club Inc. and not behave in a way that brings the Club into disrepute.	
for the club for the first time (including both members and non-members) must fill this form Signature	
out and sign the declaration to the right.	
If you have any issues with this form, please contact the Senior Tennis Co-ordinator at:	Name Date
senior.tennis@westmeadowstc.org.au	Name Date