MAYNE ISLAND TENNIS

Membership Application

Category: Adult_____ Family_____ Junior_____

Name_____ _____ M/F_____
(Last) (First)

Street:_____ Tel:( )_____

City:_____Prov:_____

E-Mail :_____

For family membership please list names (immediate family only):

Last Name	First Name	Male	Female	Adult	Junior

Membership Fees (Valid for calendar year only)

Adults—individual	@ $50.00	$_____
Junior—Individual	@ $15.00	$_____
Family	@ $ 75.00	$_____

Please return completed Membership Application with payment to:

Mayne Island Tennis Group, c/o Frankie Gowing:

632 Edith Point Road, Mayne Island, BC, V0N 2J1