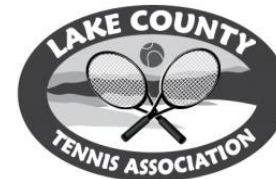


LAKE COUNTY TENNIS ASSOCIATION
REGISTRATION FORM



MEMBERSHIP FEES:

Single \$
Family (2 or more) \$
Student Family \$ 0.00

Fee Schedule: Jan and Feb: Single = \$50/Family = \$100; Mar: Single = \$45/Family = \$90;
Apr: \$40/\$80; May: \$35/\$70; Jun: \$30/\$60; Jul: \$25/\$50; Aug: \$20/\$40; Sep: \$15/\$30
Oct: \$10/\$20; Nov: \$5/\$10; Dec: \$50/\$100 includes membership for the following year

Fee Paid \$

Student's First Name: _____

(Fill in student's parent names below)

Make check payable to: Lake County Tennis Association (or LCTA). Mail to: P.O. Box 1696, Kelseyville, CA 95451

Name: _____ Name: _____

Other Family Tennis Players:

Name: _____ Name: _____

Name: _____ Name: _____

Total Number in Family _____

Address: _____

City: _____ Zip Code: _____

Email: _____

Home Phone #: _____ Cell Phone #: _____

Select preferred method of communication (check one) Mail Email Phone Text

Do we have permission to include your email/phone # on our shared membership? Yes No

Do we have permission to use your image in photos on our social media? Yes No

Which type of activity do you participate in: Tennis Pickleball Tennis and Pickleball

Signature _____ Date _____

For more information contact: Mike Shay at (310) 486-8427