APPLICATION FOR **TRIAL** MEMBERSHIP

Membership of the Club is open to anyone interested in the sport of Real Tennis on application regardless of gender, age, disability, ethnicity, nationality, sexual orientation, religion or other beliefs.

The Royal Tennis Court is happy to offer a trial membership to those who are new to the game before they apply for a permanent membership.

A trial membership will allow a non-member to play at the court and use the club’s facilities for a 3-month period, paying the members’ rates. At the end of the 3-month period, the fees will revert to guest rates.

The cost of a 3-month Trial Membership: £60.00

The 3-month period commences at the time of first court booking.

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| **THE ROYAL TENNIS COURT - TRIAL MEMBERSHIP APPLICATION FORM** | | | | | | | | |
| **Name:** |  | | | | | | **Title:** |  |
| **Address:** |  | | | | | | | |
| **Address:** |  | | | | | | **Postcode:** |  |
| **Phone:** | **H** |  | | **M** |  | | **Date of Birth:** |  |
| **Email:** |  | | | | | | | |
| **Emergency Contact Name:** | | |  | | | **Relationship:** |  | |
| **Phone:** | **H** |  | | | **M** |  | | |
| **I am happy to receive emails relating to Real Tennis** | | | | | | Yes / No\* | *\* Please delete as applicable* | |
| **How did you hear about The Royal Tennis Court?** | | | | | |  | | |

I have read the club’s guidelines and shall abide by the rules of The Royal Tennis Court

I have completed and attached the information concerning medical issues and data protection.

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| Tick payment method | Card Payment £60.00 |  | Cash Payment £60.00 |  | Cheque payment £60.00 |  |

**Signature…………………………………………….……..…. Date……………………….…………….**

**Please return to Membership Secretary: Nicola Doble, via** [**nicola.doble@gmail.com**](mailto:nicola.doble@gmail.com) **or Pros’ Office**

**The Royal Tennis Court, Hampton Court Palace, East Molesey KT8 9AU**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Medical issues**

Whilst all the Professionals are qualified First Aiders, you play at your own risk. Nevertheless, please indicate if you have any relevant medical issues (e.g. pacemaker or serious allergy) that might be important in case of emergency.

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| **Relevant medical issues:** |  |

**Data protection**

The information you provide in these forms will be used solely in connection with your membership and playing of Real Tennis. The data will not be shared with any third party for marketing or commercial purposes without obtaining your explicit consent.

By signing the application form, you confirm that you agree to:

1. your membership details being stored electronically,
2. sharing relevant details with The Tennis & Rackets Association for the purpose of administering online handicap and booking systems and
3. being involved in any publicity (including photography and television footage) surrounding the playing of Real Tennis.

If you have any queries regarding the management of your personal data, please contact the Honorary Secretary, Paul Newton on [paul\_newton2@uk.ibm.com](mailto:paul_newton2@uk.ibm.com)

**Please return with your completed trial or permanent membership application form**

**APPLICATION FOR PERMANENT MEMBERSHIP**

Membership of the Club is open to anyone interested in the sport of Real Tennis on application

regardless of gender, age, disability, ethnicity, nationality, sexual orientation, religion or other beliefs.

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| **Categories:** | **Full** |  | | **Junior Under 25** | | |  | | | **Junior Under 18** | | | | |  | | **Social** | |  |
| **Name:** |  | | | | | | | | | | | **Title:** | |  | | | | | |
| **Address:** |  | | | | | | | | | | | | | | | | | | |
| **Address:** |  | | | | | | | | | **Postcode:** | | | | | |  | | | |
| **Phone:** | **H** | |  | | | **M** | |  | | | | | | **Date of Birth:** | | | |  | |
| **Email:** |  | | | | | | | | | | | | | | | | | | |
| **Car Registration** | **1.** | |  | | | | | | | | | **2.** |  | | | | | | |
| **Emergency Contact Name:** |  | | | | | | | | **Relationship:** | | | | |  | | | | | |
| **Phone:** | **(1)** |  | | | | | | | **(2)** | |  | | | | | | | | |
| **Newsletter Preference  (social only):** | Printed / electronic\* | | | | | *Full & Junior members receive an electronic copy and additionally may collect a printed copy from the club* | | | | | | | | | | | | | |
| **I am happy to receive emails relating to Real Tennis** | | | | | Yes / No\* | | | | | *\* Please delete as applicable* | | | | | | | | | |
| **Are you a member of other Real Tennis Clubs? If so which?** |  | | | | | | | | | | | | | | | | | | |
| **How did you hear about The Royal Tennis Court?** | | | | |  | | | | | | | | | | | | | | |

|  |  |
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| **Professional Development Trust quarterly contribution £2.00 (25 and over Members only)**  (Please mark in this box if you do **NOT** wish to contribute to this fund) |  |

If elected I shall abide by the rules of The Royal Tennis Court.

I have completed and attached the information concerning medical issues and data protection.

**Signature…………………………………………….……..…. Date……………………….…………….**

*(of parent/guardian if under 18)*

**Please return to Membership Secretary: Nicola Doble, via** [**nicola.doble@gmail.com**](mailto:nicola.doble@gmail.com) **or Pros’ Office**

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