

## **Summer Membership Application**

## Valid May 1, 2018 - September 30, 2018

Name:_			Date:		
	ddress:				
Local A	ddress:	City:	State:	Zip:	
Local Phone:		Would you lik	e to receive emails	from us? Y	or N
	<u>Family Membership:</u>				
	Spouse:				
Children:		Age <u>:</u>			
		Age:_			
Emerge	ency Contact:	Phone:			
	Resident	<u>N</u>	lon-Resident		
	<ul><li>Single - \$158.00</li></ul>	o <b>S</b>	o Single \$240.00		
	<ul><li>Family - \$225.00</li></ul>	o F	amily \$330.00		
	<ul><li>Junior - \$37.00</li></ul>	o J	unior \$58.00		

\*Family= Husband/Wife and children under 18 and children under 21 attending school\*

\*Members of the tennis facility must pay for their guest and the usage of lights\*

\*Membership rates above do not include Florida sales tax\*

I, the undersigned, intended to be legally bound, do hereby for myself, family, guardians, child/children, heirs, executors and administrators, waive and release and all rights and claims for damages which I/We may have against the City of Delray Beachand/or Dubin & Associates, Inc. their successors and employees for any injuries or losses which I/We may suffer in connection with our membership at the Delray Beach Tennis Center and/or Delray Swim & Tennis Club. I/We understand that this membership is non-transferable and non-refundable; the use of this membership by anyone other than the membershi1 holder will result in the membership being automatically revoked: during tournaments, league play, and other special events members and the public may not be able to use the tennis facilities.

 $I have \, read \, the \, above \, and \, agree \, to \, comply \, with \, rules \, and \, regulations \, \, established \, by \, the \, Delray \, Beach \, Tennis \, Center \, and \, the \, Delray \, Swim \, \& \, Tennis \, Club.$ 

Signature:	Date:
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