



Junction Indoor Tennis Center

Membership Application

Name _____ Date _____

Address _____

Phone# _____ 2nd Phone# _____

E-mail Address _____

(We do our billing, newsletters, updates, and important correspondence via e-mail, so please give us an address you check often.)

Other Family Members on Membership

Name _____ Phone# _____

Child (Under 18) _____

Child (Under 18) _____

Membership Level

Single \$110/month

Out of Town Single \$75/month

Dual \$190/month

Out of Town Dual \$125/month

Family \$190/month

Out of Town Family \$160/month

Payment Method

Method (Circle One): Check Cash Credit Card Account

Type of Card _____ Name on Card _____

Signature _____

(Your signature authorizes JITC to charge your monthly dues and authorized charges.)

Card Number _____ Expiration Date _____

(Your card will be debited monthly on the 7th of each month, an invoice with the balance to be charged will be e-mailed to you on the last day of each month. You will be charged the upcoming month's dues, along with any charges you have had to your account during the previous month, you can cancel at any time and your card will not be debited.)

Play Level/Experience

NTRP Level: 2.0-2.5 3.0 3.5 4.0 4.5 5.0+Up Other _____