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Secretary: Michael Price 0412 006311

Coach: Luke Harvey 0439 723 832

# 2024 JUNIOR Membership Application

(Form for use by new members)

## 2024 Memberships

(Tennis Qld Fee Included  
HBDTA holds \$20M Public Liability insurance)

(Please select one)

Full Year Jan-Dec	Half Year Jan-Jun	Half Year July-Dec
\$120.00 <input type="checkbox"/>	\$60.00 <input type="checkbox"/>	\$60.00 <input type="checkbox"/>

Junior Single Membership

## Member Details

Given Name: .....  
 Surname: .....  
 Surname: .....  
 D.O.B: ...../...../..... Gender .....  
 Email: .....  
 Address: .....  
 Suburb: ..... State .....  
 Post Code: .....

## Parent/Guardian Details

Mothers Name: .....  
 Home Phone: ..... Work Phone: .....  
 Mobile Phone: ..... Occupation .....  
 Email: .....  
 Fathers Name: .....  
 Home Phone: ..... Work Phone: .....  
 Mobile Phone: ..... Occupation .....  
 Email: .....

Postal Address:(if different from above): .....  
 (Note: To receive notification of any up-and-coming events you need to supply an email address)

## Volunteering

The club appreciates any and all assistance through volunteering. Duties may include helping with the canteen/ umpiring during fixtures, tournaments, club events or working bees

- I wish to help with volunteering.  
 I do not wish to help with volunteering.

All volunteers must hold a current Blue Card. If you have a current blue card, please attach a copy.

- I hold a current Blue Card.  I would like to apply for a Blue Card (this is free as a volunteer).

I/We have read and agree to abide by the "Code of Conduct" for both players and parents.

Parent/Guardian Name: ..... Sign: ..... Date: ...../...../.....

Payment  Direct Deposit: BOQ: BSB 124088 Acc 23098633 Ref Surname  Credit Card – Mastercard/VISA  
 Cash at Club (obtain receipt)  
**Email Completed Form to: [accounts@herveybaytennis.com.au](mailto:accounts@herveybaytennis.com.au)**

An application for membership must be proposed and seconded by a member of the HBDTA. This application will then be considered for approval by the HBDTA Management Committee.

Proposed By: ..... Seconded by: .....

Signature: ..... Signature: .....

Date: ..... Date: .....