



Membership Application Form

●PO Box 699, Taupo ●tauposquash@extra.co.nz● (07) 378 8392●

.....
(Full Name)

.....
(Address)

.....
(Home Phone) (Mobile)

.....
(Email Address) (Date of Birth) (Occupation)

Membership Description	Annual Fees	Please Tick
Senior Membership	\$330.00	<input type="checkbox"/>
Family Membership (2 Adults)	\$550.00	<input type="checkbox"/>
Family Membership with Children	\$600.00	<input type="checkbox"/>
Corporate Membership	\$600.00	<input type="checkbox"/>
Country Membership	\$110.00	<input type="checkbox"/>
Summer Membership (1 st October to 30 th March)	\$150.00	<input type="checkbox"/>
Intermediate Membership (ages 17-19)	\$150.00	<input type="checkbox"/>
Junior Membership (Under 16)	\$75.00	<input type="checkbox"/>
Casual Play \$20.00 to hire the court for 45 mins	\$20.00	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

I hereby apply for Membership of the Taupo Squash Club Incorporated, and agree to abide by the Rules and Code of Conduct of the club, as laid down by Management. I understand that upon acceptance I shall be liable for any subscription applicable to my membership at that time, and will remain liable for payment of ongoing annual subscriptions until such time as my membership is terminated in accordance with the rules of the club.

Please make all cheques out to SANAC Ltd

.....
Applicants Signature *Date:*

Office Use Only

.....
Squash Swipe Card Number *Payment Received* *Date*
Cash/Eftpos/Cheque

.....
Payment Option *Next Payment Due* *4 digit pin*