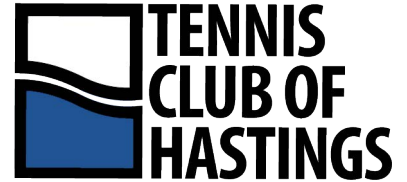


SUMMER MEMBERSHIP REGISTRATION 2024



May 31st - September 2nd

Date ____ / ____ / ____ Name(s) _____

Address _____ State ____ Zip _____

Email _____ Phone _____

I acknowledge and understand that the participation or use of the Tennis Club of Hastings facility includes an inherent risk of physical injury to me and/or damage or loss to personal property. I knowingly, freely, and willingly agree to assume all those risks. As lawful consideration for being permitted to participate, I agree to release the Tennis Club of Hastings, LLC, including all officers, sponsors, organizers, supervisors, volunteers, participants, and all other agents from any legal liability, and agree not to sue the Tennis Club of Hastings, for any and all injuries or property damage whether or not such injury, damage, death or loss was caused by negligence, carelessness, or any other cause that might otherwise result in the Tennis Club of Hastings being liable to me. I agree that I will not bring or be a party to any legal action or claim against the Tennis Club of Hastings based upon or arising from participation or any legal theory including, but not limited to, personal injury, undue influence, and/or emotional distress. I am aware that this contract is legally binding and I am releasing legal rights by signing it

Date: ____ / ____ / ____

Signature _____ Printed Name _____

___ Individual Full Club (USTA included) **\$700**

***all USTA included
with membership**

___ Couples Full Club (USTA included) **\$1300**

***members required
to pay home match
fee of \$25 per match
(balls included)**

___ Junior Full Club (USTA included) **\$450**

Total Cost \$ _____ Deposit of \$ _____ Balance due \$ _____

Payment Information (circle one) CHECK CASH CREDIT

C.C. _____ Exp ____ / ____ CVC _____

I have read and agreed to the terms set forth in this agreement.

Signature _____ Date ____ / ____ / ____