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| REGISTRATION FORM |
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First Name

Last Name

Date of Birth

Address

Suburb/Town/City

State/Province

Postcode

Country

Home Number

Mobile

Email Address

PAYMENT

| Activity | 5 Days | Daily | Day | Tennis (tick) |
|----------|----------|---------|-----------|---------------|
| Tennis | \$160.00 | \$40.00 | Monday | |
| | | | Tuesday | |
| | | | Wednesday | |
| | | | Thursday | |
| | | | Friday | |

TOTAL

PAYMENT METHOD: Please Circle: Cheque Enclosed/ Credit Card/ Cash

Card Type Visa/MC/Bankcard _ _ _ / _ _ _ / _ _ _ / _ _ _
 Expiry Date _ / _ CCV _ _ _

OFFICE

Received:

Date:

Payment type: CASH/CREDIT CARD/CHQ