



ENDEAVOUR HILLS TENNIS CLUB Inc

A.B.N 79 035 251 649

JUNIOR COMPETITION FORM

Saturday AM – Winter 2019

Season from 27th April to 31st August 2019

Player Name: _____ Male Female

Player DOB: _____ Paid up Club Member Yes No

Parents/Guardians Names: _____

Address: _____

Suburb: _____ Post Code: _____

Telephone (H): _____ Telephone (M): _____

E-mail Address: _____

Section last played: _____ Season: _____

Please complete ALL of the details above

SINGLES/DOUBLES SETS:

Ball Money \$25

SINGLES/DOUBLES RUBBERS:

Ball Money \$45

I agree to play in whichever team I am selected and understand that should I withdraw from competition at any time without a reason acceptable to the Selection Committee then I face suspension from competition for one additional season. Yes No

I understand that my child and I will be available for competition tennis between 8:00 am and 12:15 pm each Saturday morning for rostered on home and away matches. Yes No

I also understand that the nominated player is required to be a fully paid up member of the Endeavour Hills Tennis Club.

I agree to abide by the rules and policies of the Endeavour Hills Tennis Club and the Waverley and Districts Tennis Association. Yes No

Signed: _____ Date: _____

Pay by **EFT, cheque or cash**
mail/deliver payment and form to

Malcolm Molloy
3 Glamis Court, Endeavour Hills VIC 3802
Mb: 0411 039 304

Email: ehhc.juniors@gmail.com

or can also be dropped off to Coach Dee at the club on coaching nights. Mb. 0419105746

EFT Details:

BSB: 033 186
Account: 351183
Account name: Endeavour Hills Tennis Club
Bank: Westpac Dandenong Plaza

Cheques should be made payable to "Endeavour Hills Tennis Club" and **marked 'Not Negotiable'**

ENTRIES CLOSE: Sunday 17th February 2019 (No exceptions)

****More Copies of this form can be found at our website****

www.endeavourhillstennisclub.com.au