

Westerleigh Tennis Club

369 College Avenue Staten Island, New York 10314

New Member Application

Board President: Glenn Saul Membership Director: Ann Sorena

		Appl	icant(s) Information				
Name of Primary Applicant:		First			M.I.	Date:		
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Address:	Street Address					Apartment/Uni	t #	
	City				State	ZIP Code		
Home Phone:	_			Mobile Phone				
Email:								
	Membership Applications can i 18 years old and younger. Plea							
Spouse or Domestic Partner?		YES	NO	If yes, please provide	e their full n	ame below:		
Children under 18?		YES	NO	If yes, please provide	If yes, please provide name(s) and age(s) below:			
				Name			Age	
	How Did Yo	u Hear A	bout	the Westerleigh Teni	nis Club?			
Referred	I by a friend			☐ Learned about V	Vesterleigh	from a fellow tennis	player	
☐ I've played at Westerleigh as a guest				☐ Other	Other			
☐ The Westerleigh Club Website								
☐ I live in the neighborhood							<u></u>	

Please identify your top 3 reasons by order of interest: I'm an avid tennis player & prefer to play on clay courts ☐ I am interested in playing competitive tennis My friends are members and encouraged me to join ☐ I am interested in the events sponsored by WTC I am looking for a new social group who enjoy tennis ☐ I want to play with strong players I want access to the Westerleigh tennis courts I am new to tennis and want to learn in a group setting I am interested in the Club and its history I live in the community and enjoy tennis **Tell Us About Yourself** and Any Additional Family Members in your Application Primary How many years Do you have a have you been Applicant's **USTA Rating?** playing tennis? First Name: (If yes, please insert) Do you currently play in any tennis leagues? ☐ YES If yes, where? □ NO Are you currently a member of any other tennis clubs? If yes, where? ☐ YES □ NO Have you been a member of Westerleigh or any other tennis clubs in the past? If yes, where? ☐ YES ☐ Once a week ☐Twice a week \square > Twice but < 5 \square 5 + days /wk How often do you play? (Please choose) ☐ Infrequently, but I would like to play more ☐ Other Please share anything else you want us to know when considering your application for membership: (IE: Describe your level of play if no USTA Rating) Spouse's first name if How many years Do you have a included in have you been USTA Rating? application: playing tennis? (If yes, please insert) Do you currently play in any tennis leagues? ☐ YES □NO If yes, where? Are you currently a member of any other tennis clubs? If yes, where? ☐ YES Have you been a member of Westerleigh or any other tennis clubs in the past? □ YES Пио If yes, where? ☐ Once a week ☐Twice a week \square > twice but < 5 \square 5 + days /wk How often do you play? (Please choose one) ☐ Infrequently, but I would like to play more ☐ Other

Why Are You Interested in Joining Westerleigh Tennis Club?

Please share anything else you want us to	know when considering your application for membership:
(IE: Describe your level of play if no USTA Ratin	ng)
If your application includes your children (tennis interests and level below:	18 years old and under only please), please briefly describe their current
	References / Member Spencer
	References / Member Sponsor
willing to serve as a personal reference. Pleas	s is <u>required</u> . Sponsors should have insights to your playing abilities and must be se ensure those you list as your Sponsors are aware of your application and rd will contact your Sponsor for confirmation.
Sponsor Name:	How are you connected?
Sponsor Name.	Ilow are you connected:
Sponsor Name:	How are you connected?
•	
Sponsor Name:	How are you connected?
	Disclaimer and Signature
I certify that my answers are true and comp	lete to the best of mv knowledge.
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immediate addition to the membership wait	ation does not guarantee acceptance into the Westerleigh Tennis Club or list.
I agree to be interviewed by the Board or a contact my sponsors, as provided, for verific	member or members of the Board. I also understand that the Board will cation.
Signaturo	Data:
Signature:	Date: