



Sandy Cove Tennis & Squash Club

Senior Application Form

I wish to apply for Membership of Sandy Cove Tennis & Squash Club. (Please state whether you are applying for tennis or squash and delete where applicable) If accepted I agree to be bound by the Rules of the Club.

Name:	Date of Birth:	
Address:	Home Phone:	
	Work Phone:	
	Mobile:	
Occupation:	Email:	

Category of Membership being applied for: e.g. Senior Tennis (TA) [List of categories](#)

Category:	
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If you are in Full time education please give your college details below:

College Details:	
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Previous Club:	
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Have you played league tennis/squash and if, yes, what class did you play?

If you have not played league tennis/squash, please tick a box to state your standard of tennis/squash from the following headings:

Beginner:	<input type="checkbox"/>	Improver:	<input type="checkbox"/>	League Standard:	<input type="checkbox"/>
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Proposer's Signature:	
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Seconder's Signature:	
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Applicant's Signature:	
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Date of Application:	
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Please return application to:

Catherine Mc Cooley
Club Administrator,
Sandy Cove Tennis & Squash Club,
Elton Pk,
Sandy Cove,
Co Dublin.