

Membership Contract

Westfield Tennis Club ~ 3511 18th Ave SW ~ Cedar Rapids, IA 52404 ~ (319)396-7060

Please check type of membership desired:

Individual _____ Couple _____ Family _____ Under 35 _____

Junior _____ Limited (55+) _____

Last Name: _____ First Name: _____

Home Address: _____ City: _____

State: _____ Zip Code: _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____

E-mail Address: _____ Spouse First Name: _____

Family Members Names & Ages:

Membership and other Charges

I understand there is a monthly membership charge as well as charges for court time, specialized services, and programs. A schedule of current rates is available at our website at www.WestfieldTennisClub.com. The Club reserves the right to change the amount of these dues and rates from time to time.

Billing Procedures

I authorize Westfield Tennis Club to charge my: Visa _____ MasterCard _____ Discover _____
American Express _____ for payment of monthly membership dues.

Account # _____ Expire Date _____ Security Code _____.

I understand all monthly dues will be automatically charged to the account I have authorized. The transfer of funds will occur on or about the fifth of each month.

Terms of Membership and Resignation

All memberships shall be for a minimum period of one year, beginning with the date upon which monthly dues become effective. After that point, the member may elect to terminate membership by a 30 day written notice to the club address listed above. Memberships may be terminated if the member moves to a permanent residence more than 60 miles from the club.

I understand that my membership may be terminated by the club if I am in violation of club rules, regulations and policies, and conduct myself in a manner which management deems inappropriate or disruptive to other members of the club, or make false representation of information contained in this application. I will not be entitled to any refund of the initiation fee or dues paid up to the date of termination. Upon termination of my membership I am responsible for any outstanding balance due.

Signature

I hereby apply for membership at Westfield Tennis Club. I understand that this application is subject to review and approval of the club management. By signing this application, I/we agree to all the terms of the membership agreement as stated above, including agreement to the club billing service.

Date: _____ Applicant's Signature (or parent, if a Junior): _____