



Seattle Pacific Table Tennis Club
 西雅图欣然乒乓球俱乐部



MEMBERSHIP REGISTRATION FORM

Applicant Profile

First Name: _____ Last Name: _____

Birthday: ____ / ____ / _____ Gender: M / F

Mailing Address: _____

Email: _____ Phone #: _____

Driver's License ID: _____ Referred by: _____

Fees

- _____ Adult \$600/year; \$190/quarterly if you buy three months at a time;
\$75/month if you buy one month at a time.
- _____ Junior (Under age of 17) \$400/year; \$110/quarterly if you buy three months
at a time; \$55/month if you buy one month at a time.
- _____ Family (Maximum 2 Adults and 2 kids under age of 17): \$1000/year;
\$300/quarterly if you buy three months at a time; \$115/month if you
buy one month at a time.
- _____ Senior (65+ years old) receives 15% discount.

I/our organization agree(s) to abide by all the SPTTC rules and regulations and I/we hereby release the SPTTC from liability for loss, damages or injury that my result from my/our participation in any and all SPTTC activates. SPTTC reserves rights to change open play schedule and all fees without prior notice.

Signature of Applicant: _____ **Date:** _____

Signature of Parent or Guardian: _____ **Date:** _____
 (in case of minor)

FOR OFFICE USE ONLY:

Date received: _____ **Photo Taken: YES / NO**
Date approved: _____ **Membership #:** _____
Date of key tag issued: _____ **Key tag number:** _____