

# Live Oaks Tennis Association

## REQUEST FOR MEMBERSHIP

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Email address: \_\_\_\_\_

Residence Street Address: \_\_\_\_\_

City: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mbl Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

Number of years you have played tennis: \_\_\_\_\_

Rate your ability (A, B, C, etc. or 4.5, 4.0, 3.5, 3.0) \_\_\_\_\_

Spouse's name: \_\_\_\_\_

Does spouse play tennis: \_\_\_\_\_ Rate spouse's tennis ability: \_\_\_\_\_

Children's names and ages: \_\_\_\_\_

Please submit this form together with letters/emails of recommendation from two sponsors and the application fee of \$250.00 that will apply toward your membership initiation fee (\$1,250). This \$250 fee is not refundable.

**Form, check, & 2 recommendations MUST be submitted to be added to the wait list**

Sponsor: \_\_\_\_\_

Co-Sponsor: \_\_\_\_\_

Other members you are acquainted with: \_\_\_\_\_

**Please submit application via email: [LiveOaksBOD@gmail.com](mailto:LiveOaksBOD@gmail.com) Subject:New Membership**

**Please submit check to: LOTA, PO box 246, South Pasadena, CA 91031-0246**