



## Squash Club Membership Application Form

### Personal Information

- Full Name: \_\_\_\_\_
- Date of Birth: \_\_\_\_\_
- Gender: \_\_\_\_\_
- Address: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_
- ID Number: \_\_\_\_\_
- Occupation: \_\_\_\_\_

### Emergency Contact Information

- Contact Name: \_\_\_\_\_
- Relationship: \_\_\_\_\_
- Phone Number: \_\_\_\_\_

### Membership Type per Annum

- ☐ Individuals – R2250.00
- ☐ Couples – R1950.00 (each)
- ☐ Families – R6200.00 (Family of 4 – Includes 2 adults over 18 and to under 18 juniors)
- ☐ Juniors younger than 18 – 1550.00
- ☐ Pensioners – R1450.00
- Lights – R60 for 50min (30pp)

### Membership Type per Month

This agreement is for a term of one (1) year. In the event of early cancellation, the member agrees to pay the remaining balance of the contract for the unused months and will be held financially responsible for the full term of the agreement.

- ☐ Individuals – R230.00
- ☐ Couples – R200.00 (each)
- ☐ Families – R550.00 (Family of 4)
- ☐ Juniors younger than 18 – 170.00
- ☐ Pensioners – R160.00
- Lights – R60 for 50min (30pp)

### Visitors Fee

- R150pp Including Lights 50min

### Payment Method

- ☐ Card payment
- ☐ Cash
- ☐ Bank Transfer
- ☐ Debit Order

### Banking Details:

Bank: F N B  
Account Type: Business Account  
Account Number: 63103165783  
Branch Code: 255355  
Branch Name: My Branch  
Reference: Membership nr. (will be produce before payment)  
Email proof to [info@greenturfsports.co.za](mailto:info@greenturfsports.co.za)

### Payment Information (Office use only)

- Joining Fee (include access tag): \_\_\_\_\_
- Total Amount: \_\_\_\_\_

**Membership Agreement**

I, \_\_\_\_\_ hereby apply for membership at Green Turf Squash Club and agree to abide by all club rules and regulations. I acknowledge that I have read and understood the membership contract and agree to the terms and conditions outlined therein. I consent to the use of my personal data for membership purposes in accordance with the club's privacy policy.

**Media and Social Media Consent:**

I consent to being filmed or photographed during club activities and events. I understand that these images and videos may be used by Green Turf for promotional purposes, including but not limited to social media platforms, the club's website, and other marketing materials.

**Cancellation.** Members must provide a written notice of at least [30 days] prior to the intended cancellation date. Notice should be submitted using the official Membership Cancellation Form.

**Signature:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

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

**Health and Safety Information**

- Do you have any medical conditions or concerns that we should be aware of?

☐ Yes ☐ No

If yes, please provide details: \_\_\_\_\_

- Have you consulted with a physician before starting physical activities? ☐ Yes ☐ No

- Do you have a Medical Aid? ☐ Yes ☐ No

If yes, please provide details:

- Medical Aid Name: \_\_\_\_\_

- Main Member Name and Surname: \_\_\_\_\_

- Medical Aid Number: \_\_\_\_\_

**Club Usage**

- Are you interested in participating in Club events or tournaments? ☐ Yes ☐ No

If yes, please specify: \_\_\_\_\_

**Additional Information**

- Squash experience?

- ☐ Social ☐ Beginner ☐ Intermediate ☐ Pro

- How did you hear about us?

☐ Referral ☐ Website ☐ Social Media ☐ Advertisement ☐ Other: \_\_\_\_\_

- What are your squash goals or interests? \_\_\_\_\_

- Would you like to receive additional and promotional email regarding our events at Green Turf? ☐ Yes ☐ No

**Office Use Only**

- **Application Received By:** \_\_\_\_\_

- **Date Received:** \_\_\_\_\_

- **Membership Number:** \_\_\_\_\_

- **Status:** ☐ Approved ☐ Pending ☐ Rejected

- **Notes:** \_\_\_\_\_