



IDLE HOUR MEMBERSHIP APPLICATION

Sponsor: _____ Date: _____

Submit your completed application with check to the Pro-Shop or mail your application with check, made payable to Idle Hour Tennis Club P.O. Box 22 Chester Heights, PA 19017

Check	Membership Category	Annual Fee
	Regular/Senior Member (25 as of 1/1/20)	\$430
	Family Membership (2 adults living in same house)	\$785
	Family Membership (2 adults living in same house with 1-4 children)	\$800
	Family Membership (1 adult with 1 child)	\$445
	Junior not related to member (under 25 as of 1/1/20)	\$50

Player 1: Gender ____ Date of Birth _____ USTA Rating: ____ USTA #: _____

Name _____

Address _____

City _____ State _____ Zip _____

Primary Phone _____ Secondary Phone _____

E-mail: _____ (print legibly)

Player 2: Gender ____ Date of Birth _____ Phone: _____

Name _____ USTA Rating: ____ USTA #: _____

E-mail: _____ (print legibly)

Player 3: Gender ____ Date of Birth _____ Phone: _____

Name _____ USTA Rating: ____ USTA #: _____

E-mail: _____ (print legibly)

Player 4: Gender ____ Date of Birth _____ Phone: _____

Name _____ USTA Rating: ____ USTA #: _____

E-mail: _____ (print legibly)

Application Information:

- 1) When your application and check are received, your name will be posted at the club for 5 days and presented to the Board.
- 2) The Membership Chair will notify you of the Board's decision.
- 3) Please review the club's "Rules and Regulations" at www.idlehourtennis.com.
- 4) For more information, contact membership@idlehourtennis.com or call Pat DeHaven 610-999-1668.