



Waiting List Application Form Adults Only

Date of Application: (mm)_____ (dd)_____ (yyyy)_____
Date Received: (mm)_____ (dd)_____ (yyyy)_____

Courts and Club House Location

40 Montgomery Road
(behind Memorial Pool)

Mail to:

CTC Registration
5 Maple Branch Path
Toronto, ON M9P 3T4

Visit our website: www.centraltennisclub.com

membership@centraltennisclub.com

PLEASE PRINT

First Name: _____ Level of Play: _____

Last Name: _____ Gender: M F

Home Address: _____

City: _____ Postal Code: _____

Home Phone: (____) _____ Business Phone: (____) _____

EMAIL Address: _____ (please write clearly)

(for our information only—will not be given to other sources)

For additional **adults** (maximum 2 per family) name the additional player below

First Name: _____ Level of Play: _____

Last Name: _____ Gender: M F

Business Phone: (____) _____

EMAIL Address: _____ (please write clearly)

(for our information only—will not be given to other sources)

WAITING LIST FEE: \$30.00 PER ADULT

When admitted to the Club, the waiting list fee will become the Initiation fee.

The waiting list fee will not be refunded should you decide not to join, when space becomes available.

Please make your cheque for \$30.00 (per adult) payable to:
CENTRAL TENNIS CLUB, and mail to the address above.

Signature: _____