

Steamboat Tennis & Athletic Club (STAC)  
MEMBERSHIP APPLICATION



**Applicant Information**

First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_ Last Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Street Name: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_ DL #: \_\_\_\_\_

**Spouse/Dependants/Children \*\* 18-24 years old must complete liability and release form\*\***

NTRP Rating

First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_ Last Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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Membership Type:      Single       Couple       Family       Junior       Social

**Emergency Contact**

Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Preferred method of payment:** (select one)       Automatic Credit Card Deduction       Electronic Funds Transfer (EFT)

**PLEASE READ AND REVIEW BEFORE SIGNING**

- I understand that STAC is not responsible for lost, stolen or damaged items.
- I understand that physical activity can be risky and dangerous. I will seek the advice of a physician before beginning a new exercise program for dependants or myself.
- I understand that my account will be fined a finance fee on past due balances. I also understand that I am responsible for all collection fees, court costs, and attorney fees if my account becomes past due.
- I understand that my payment of initiation fees, membership dues and any other club charges incurred by me, my family, and guests does not give me any interest in the club, its ownership, its property, or its assets. I take responsibility for any charges incurred to my account by me or my dependents on my membership.
- I understand that if I or a member on my account does not give proper notice to cancel an appointment, I will be charged for the amount of the appointment for personal training, nutrition, swim lesson, tennis lesson, tennis court cancellation fee, or other program as specified per the 24 hour cancellation policy.
- I understand that STAC reserves the right to revoke or terminate my membership at its sole discretion, any time, should my conduct or the conduct of my dependents be viewed by management as inappropriate or if my account is in excess of 90 days past due, and that I must pay the outstanding balance due as well as a new initiation fee to regain my membership.
- I understand that it is my responsibility to notify STAC of any billing information changes and that I will pay by checking account (EFT) or Automatic Credit Card Deduction, of which I have indicated above.
- I understand that I will be charged a \$25 fee for each time a Credit Card Deduction or NSF Check is returned.
- I understand that membership policies can be obtained and reviewed at the front desk.
- I understand that my membership may be cancelled at any time after giving written notice to STAC or by appropriately completing a Membership Change of Status form available at the front desk. If this notice is mailed it must be certified with a return receipt enclosed. I understand that giving **verbal notice of cancellation is inadequate.**
- I understand that my signature under the 1-year contract terms and condition binds me to 1 year of active membership. If I terminate early, I must pay the remaining balance of the discontinued enrollment fees for my existing membership level. \$ \_\_\_\_\_
- I understand that Steamboat Tennis & Athletic Club adopts general increases in dues from time to time, and the dues I am obligated to pay may be increased whenever such general increases are adopted. After one year, my membership will begin as a month-to-month contract and I may terminate at any time with written notice and without obligation to pay the remaining balance of the enrollment fee.

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

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