

**COMPLETE AND RETURN TO:
HARRISONBURG TENNIS PATRONS
P.O. BOX 972
Harrisonburg, Va. 22803**

**Make check payable to:
Harrisonburg Tennis Patrons**

Type of Membership (check one)

Family \$24 _____

Adult \$15 _____

Senior \$12 _____

Junior \$12 _____

Corporate _____

Sponsor \$150 _____

Old members add \$5.00 after April 30.

REQUIRED: All new members and current or old members need to fill out all the information

***Member's Name** _____

If family membership or corporate sponsor, include name of spouse and children (include ages of juniors).

***Address** _____

***Phone: Home** _____ **Work** _____

Cell _____

HTP is going green and would like to correspond to members through our web site or emails.

***Check which one would suit you?**

Mail _____ **Email** _____

***Email Address** _____