



New Membership Application

Name(s)

Individual : _____

Individual : _____

Children (Please list ages as of June 1 in years): _____

Name: _____ Age: _____ Name: _____ Age: _____

Name: _____ Age: _____ Name: _____ Age: _____

Primary Address

Primary Telephone: _____ Primary E-mail: _____

Secondary Address

Secondary Telephone: _____ Secondary E-mail: _____

Preferred Mailing Address (check as applicable):

General: Primary Secondary **July/August:** Primary Secondary

Is there a current TLBC Member sponsoring your application? Yes No

Please request a letter of support for your application.

Name of Sponsor: _____

List all TLBC Members who know you: _____

Describe your experience to date with TLBC. _____

Why do you want to join TLBC? _____

TLBC relies on the active participation of its Members.

Which of the following areas would you like to become involved in?

Social Events Children's Programs Tennis Program

Clubhouse maintenance Waterfront maintenance Grounds maintenance