

Person submitting application: _____ Preferred phone: _____

(Non-member) mailing address: _____

Email (print) _____ Number of courts requested: _____

	Names	Non-Member?	Full/half/qtr. slot?	Amount due from non-member	Amount to bill member
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
Totals					

Court and Time Requests

Order of Preference	Day	Starting Time	Court
1			
2			
3			
4			
5			

EXAMPLE OF RATE CALCULATION:

Eight members and two non-members request two courts during prime time:

Step 1: Member Rate: \$1,162 (\$581 x 2) / 10 people = \$116.20 per member.

Step 2: Non-Member Rate: \$2,484 (\$1242 x 2) / 10 people = \$248.40 per non-member.

Full payment for each non-member is due with the application.

Please draft my credit card for the deposit due: **(PRINT LEGIBLY)**

**** 3% credit card processing fee will be applied ****

Card (circle) : VISA MasterCard Discover

Card number _____ Expiration: _____

Name on card _____

Card billing address: street, city, state, zip _____

Signature of applicant/cardholder: _____