CATS MEMBERSHIP APPLICATION SEPTEMBER 1, 2020 – AUGUST 31, 2021

I AM A:	
New Member	Renewing Member
Who invited you to join CATS, or how did you find out about CATS?	If your information is the same as last year, just fill in your name in the Personal Information section.
My skill level is: C (2.5-3.0) B (3.0-3.5) A (3.5-4.0) Open (4.0) Don't know.	
PERSONAL INFORMATION	
First NameLast Name	
Address	
CityState	eZip
Home phone	Cell phone
Email address	@
Birthday MonthDay(Optional)	
MEMBERSHIP TYPE AND COST (Choose only one)	
League Player: Plays full or part-time as a member of a tea	ım.
New member: Annual membership running September 1 – August 31: \$40	
Renewing member through August 31: \$35	
Renewing member after August 31: \$40	
Social/Sub/Summer-Only Player Member: \$15 . During the Fall and Winter Sessions, social members can choose to be placed on a league play sub list and play up to three times during a session. During the Summer Session, social members may play on a team. (New members who joined in April or May to play in the Summer Session and paid \$15 may extend their memberships through August 31 of the following year by paying an additional \$25 before September 1.) Social members pay the member price for CATS events.	
PAYMENT OPTIONS (Chose only one)	
CATS accepts Zelle and checks as payment. Indicate which you are using.	
Zelle: Send payments to: catstreas@gmail.com. Entername and the purpose of the payment. Follow the instruction catstennis.org/membership-fees/payingwithzelle	er: the dollar amount you intend to pay. In the "Message/Memo" field, enter: ns to send payment. For more information about using Zelle, visit
Check: Check # Amount \$ C	checks should be payable to CATS and mailed with this application.
WAIVER	
Society, its directors, officers, members, and participants. I	nout assumption of responsibility of any kind by Chicago Advertising Tennis In consideration of the acceptance of my application, I do hereby release and ses, or injuries which I may have to hereafter incur, and all such claims are re.
Signature (Required)	Date

Mail your application and check to the Membership Chairman: Dave Herd, 540 Michigan Ave., #H-2, Evanston IL 60202-3037. For more information, contact Dave at 847-869-8014 or Dave@DaveHerd.com