



Annual Membership Application or Renewal Form (April)

Virginia Beach Tennis Patrons Association, Inc.
P.O. Box 631, Virginia Beach, VA 23451

_____ \$10.00 Individual _____ New _____ Renewal

Applicant(s) Information (please print or type)

Name(s)	
Address	
City, State	
ZIP Code	
Telephone (home)	
Telephone (work) Optional	
Telephone (cell) Optional	
E-Mail(s) For VBTPA Purposes Only	

Signature(s)
Date

DONATIONS TO THE VBTPA ARE TAX DEDUCTIBLE AND ARE GREATLY APPRECIATED

Please accept my donation of (write in amount): _____

I would like my donation to go toward (please specify - Junior Development, Adult League, Tournaments, Wheelchair Tennis, General VBTPA Needs, etc.):

**Please mail checks to: Virginia Beach Tennis Patrons Association,
ATTN: Treasurer, P.O. BOX 631, Virginia Beach, VA 23451**