



OMAHA TENNIS ASSOCIATION – MEMBERSHIP REGISTRATION FORM

New Member _____ Renewal _____

Today's Date: _____

Personal Information

Last Name: _____ First Name: _____ Birthdate: _____ NTRP Rating: _____
Address: _____ City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Secondary Phone: (____) _____ ☐ Cell ☐ Work Other: _____
Email Address: _____ ☐ Please contact me regarding OTA volunteer opportunities

OTA Annual Membership (Check one - Checks payable to OTA)

☐ Single Adult \$20 If family membership, list additional household members. ☐ Permission to include children's names in the OTA Roster Book.
☐ Junior \$10 Spouse: _____ NTRP: _____ Secondary Phone: _____ ☐ Cell ☐ Work
☐ Senior \$15 Child: _____ Child: _____
☐ Family \$30 Child: _____ Child: _____

Above amounts are dues for a calendar year membership. Multi-year membership dues may be paid in advance. ☐ One ☐ Three ☐ Five

Amount Included for OTA Membership \$ _____

OTA Development Fund - Tax Deductible Donation (Checks payable to OTA Development Fund)

☐ Club Contributor \$50 or less \$ _____
☐ Champion Benefactor \$51 -150 \$ _____
☐ Professional Patron \$ over 150 \$ _____

Please use my Development Fund donation for: ☐ Schools Programs ☐ Junior Scholarships ☐ Inner City Tennis Development
☐ Omaha Tennis Buddies/Special Olympics ☐ Light the Courts at Koch
☐ Where it is most needed

Amount Included for Tax Deductible OTA Development Fund Donation \$ _____

Return this form & payment to:

**Omaha Tennis Association
PO Box 642044
Omaha, NE 68164**

Total Amount Enclosed \$ _____