



WILLIAM & MARY

MCCORMACK-NAGELSEN TENNIS CENTER

Membership Application

Name _____

Street Address _____

City, State, Zip _____

Home Phone _____ Work Phone _____

Cell Phone _____ Other Phone _____

Email _____

Membership Category (please check one)

Family Adult Junior W&M Gold Military

For Family memberships, please list names of family members (dependents must be living at home and be under 26 years of age)

1. _____

2. _____

3. _____

4. _____

Membership is valid for a minimum of one year from date of purchase and renews automatically each year.

Annual Membership Fees					
	Adult	Junior	Family	W&M Gold**	Military***
Yearly* (15% off)	767.55	368.05	1,267.35	482.80	482.80
Monthly*	75.25	36.08	124.25	47.34	47.34

* Fees are subject to annual increases. MNTC will notify members of increase at least 30 days prior to increase, which will be in effect in November of each year.

** W&M Gold membership consists of alumni, affiliates, W&M employees, and visiting scholars.

*** Military consists of active military. Photo id verification may be required.

Membership Cancellation

Members must give at least thirty (30) days notice of membership cancellation, after the minimum of 12 months has lapsed. Any cancellation shall not relieve the member of the monetary obligation for membership dues owed to W&M. Notice of resignation requires a 12-month lapse in membership before reinstatement may occur unless member pays the membership dues during the time lapse in membership.

Photo Release (please check one)

- I give permission to MNTC and the University to take still photographs and/or video of myself and my family to use and distribute these images, without compensation, on any media platform, including but not limited to MNTC promotional materials or the websites or social media pages of MNTC and/or the University. I understand that I am not required to give this permission to participate in any MNTC Tennis Programs.
- I do not give permission to MNTC or the University to take or use photographs or video of myself or my family for any purpose. I acknowledge that MNTC and the University will use best efforts to avoid photographing/recording myself or my family, but that myself or my family may be inadvertently photographed/recorded during the course of the MNTC Tennis Programs.

Policies/Privacy

- I have read the MNTC Policies found at <https://williamsburgtenniscenter.com/policies>
- I do not want my name and other pertinent information shared with other club members

Signature _____

Date _____