



I hereby apply for OASIS Beach and Tennis Club membership and the resultant rights and privileges.

#### PRIMARY INFORMATION

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr.

Name (Please Print) \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
Home Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_  
Email Address \_\_\_\_\_

Marital Status ☐ Single ☐ Married

Company Name \_\_\_\_\_ Type of Business \_\_\_\_\_  
Business Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Business Phone (\_\_\_\_) \_\_\_\_\_ Title \_\_\_\_\_ Length of Employment \_\_\_\_\_

#### SPOUSE INFORMATION

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr.

Name (Please Print) \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
Cell Phone (\_\_\_\_) \_\_\_\_\_ Email Address \_\_\_\_\_

Company Name \_\_\_\_\_ Type of Business \_\_\_\_\_  
Business Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Business Phone (\_\_\_\_) \_\_\_\_\_ Title \_\_\_\_\_ Length of Employment \_\_\_\_\_

#### DEPENDENT INFORMATION

Name (under 21) \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### MEMBERSHIP INFORMATION

I'm applying for Membership in the following category (Refer to enclosed classification descriptions and fee)

☐ Family ☐ Single ☐ Senior

I would prefer monthly statements mailed to my

☐ Home ☐ Business ☐ Online Email

#### FEEDBACK

How did you hear about us

☐ Website ☐ Billboard ☐ School ☐ Friend \_\_\_\_\_

#### INITIATION FEES AND DUES

Initiation Fee \$ \_\_\_\_\_ (+Tax) \_\_\_\_\_

\*Note: The initiation fee should accompany the application for club membership.

The monthly dues are \$ \_\_\_\_\_ (+Tax) \_\_\_\_\_

(Dues are subject to change at the discretion of the Club)

#### JUMPSTART INFORMATION

##### TENNIS

ADULTS: (Please write individual's name next to the program(s) he/she is interested in)

Leagues

Private Instruction

Group Clinics

Tournaments

Women's Tennis Association (WTA)

Adult Instructional Program (AIP)

Tennis Mixers

5757 South State Highway 205  
Rockwall, TX 75032

TENNIS LEVEL (Please Circle)	Men	Beg	3.0	3.5	4.0	4.5	5.0	Adv.
	Women	Beg.	3.0	3.5	4.0	4.5	5.0	Adv

##### TENNIS

JUNIORS: (Please indicate which child is interested in the following program(s))

Beginner

Intermediate

Elite

ATHLETIC AND WELLNESS CENTER (Please write which adult child(ren) are interested in following program(s))

Massage

Strenght & Conditioning

Personal Training

Pilates

Spin

Yoga

SWIM (Summer only) (Please indicate interest in which program(s))

Pool Parties

Private Lessons

Soccer

Basketball

SOCIAL (Please indicate interest in which program(s))

Private Parties

Birthday Parties

Events Weddings

Group/Business

Meetings & Meals

#### MEMBERSHIP RATES

Membership	Join in PHASE I*		Join in PHASE II*	
	Initiation	Dues	Initiation	Dues
Family	\$250	\$175	\$1000	\$195
Single	\$200	\$125	\$800	\$150
Senior	\$200	\$100	\$800	\$125

Mail to:

519 Interstate 30, Suite 146, Rockwall, Texas 75087

Fax to :

214.279.4555

Physical Address:

5757 State Hwy 205, Rockwall, TX 75032

Phone:

972.772.7768