

2023 CHARBONNEAU PICKLEBALL CLUB MEMBERSHIP APPLICATION

CHARBONNEAU RESIDENT	NEW PICKLEBALL SINGLE	MEMBERSHIP	\$80
CHARBONNEAU RESIDENT	NEW PICKLEBALL FAMILY	MEMBERSHIP	\$120
MEMBER NAME(S):			
ADDRESS:			
CITY:			
HOME PHONE:	WORK/CELL PHONE	E(S):	
EMAIL ADDRESS: *			
* Please indicate if you do <u>not</u> desire to	have your email address included on t		Bookings.
ANNUAL MEMBERSHIP DUES		\$	
Initiation Fee of \$100.00		\$	
	TOTAL DUE	\$	
Make checks payable to Charbon 97070	neau Country Club, 32000 SW Ch	arbonneau Dr, Wilso	nville, OR
If you are a new member, describe	e how you learned about the Cha	rbonneau Tennis Club	o:
Be sure to sign the agre	eement on the back of this pa	age (page 2 of 2)	→
	For office use only		
Passes Given User No	o Code	Member ID#	

Date paid _____ Check No. ____

By signing below, I agree:

- That I will not give, share, loan, or otherwise provide my individual or family access number code with any other Charbonneau Tennis Club members or any non-members of the Club
- That the information supplied on page one of this Charbonneau Tennis Club application is true and accurate
- To abide by all Charbonneau Tennis Club Rules and Regulations and the Charbonneau Tennis Club by-laws
- As a parent or guardian of minors using the Tennis facility, I will make certain that those under my authority abide by the rules above
- I agree to indemnify and hold harmless the Charbonneau Country Club, its Officers, Directors, employees, and agents against any suits, costs, loss, damage, or liability arising out of or in connection with my use of the Charbonneau Tennis Club. I further agree to assume all risk of personal injury or loss, including death, arising out of or in connection with my use of the facilities at the Charbonneau Tennis Club.

Signature	Signature	

Print Name	Print Name
Date	Date

Charbonneau Country Club 32000 SW Charbonneau Drive Wilsonville, OR 97070 503-694-2300