

2012 USTA SUPER SENIOR 65

NAME	
RATING	
HOME TEL #	
CELL #	
E-MAIL	

Please circle the team you wish to play on	WOMENS		SSW 4.0 Diane Fass
	MENS	SSM 3.5 Steve Jaffe	SSM 4.0 Jack Anderson

Please check - are you willing to serve as a captain or co-captain?	YES		NO	
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Please check that you will be available for the majority of matches (see Statement for likely days/times)	YES		NO	
If no please explain availability				

NOTE: this form is for MEMBERS only. Non-members should ask the club office for a non-member application and know that participation on MTC teams requires Tennis Committee approval.

YOUR SIGNATURE		DATE	
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PLEASE SUBMIT BY JANUARY 8th