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## Coulee Region Tennis Association Membership Form:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME/CELL PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

ANNUAL DUES: SINGLE \$20 \_\_\_\_\_ FAMILY \$40 \_\_\_\_\_ JUNIOR \$10 \_\_\_\_\_

IF JUNIOR, AGE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

IF FAMILY, OTHER NAMES/CHILDREN AGES:

\_\_\_\_\_

ARE YOU A USTA MEMBER? \_\_\_\_\_ YES \_\_\_\_\_ NO

IF YES, YOUR USTA RATING IF KNOWN: \_\_\_\_\_

**ANNUAL MEMBERSHIP AUTOMATIC IF A TEAM MEMBER FOR  
LA CROSSE TEAM TENNIS ASSOCIATION (LTTA) ADULT TENNIS LEAGUE**

**MAKE CHECK PAYABLE TO: COULEE REGION TENNIS ASSOCIATION (CRTA)**

**MAIL TO: COULEE REGION TENNIS ASSOCIATION**

**PO BOX 191, LA CROSSE WI 54602-0191**