

MSTA Membership Registration

"Promoting lifelong physical activity in the Mat-Su Valley and State of Alaska through the sport of tennis"

Last _____ First _____ Date _____

Mailing Address _____ City _____

State _____ Zip _____ E-mail _____

Ph# _____ Birthdate _____

How did you hear about us (web/social media/other)? _____

Individual Membership \$20

Family Membership (4 max.) \$50

(family #2) _____

(family #3) _____

(family #4) _____



Additional Family Members: More than 4 total, add \$14 for each

Donation (tax deductible! EIN#46-2938934) \$ _____

Waiver and Release

I fully understand the risks and dangers inherent in tennis. I, both for myself and my family members, accept and assume all such risks and agree to release and discharge Mat-Su Tennis Association, its officers, directors, employees and volunteers from any and all claims based on accidents or injuries, including death directly or indirectly associated with any Mat-Su Tennis Association sponsored activity.

By submitting this form, I agree to the terms above. _____

(signer must be 18 years or older)

Office Use Only:

Payment Amount: _____

___ Cash ___ Check # _____

___ Visa ___ M/C ___ Other

Shirt Sizes

Youth ___ Lg ___ Md ___ Sm

Adult ___ 2XL ___ XL ___ L

___ M ___ S

Volunteer Opportunities

I am interested in helping with:

- Leagues Committees
 Youth instruction Other

Return this form to: MSTA, 6271 N. Talgach View Dr., Wasilla, AK 99654