



USTA REGISTRATION FORM

- Men's team Women's team

Team Captain _____

Team Name _____

Team # _____

USTA # _____

Level _____

Team Member

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Home Phone _____

Work Phone _____

Cell Phone _____

Payment Method

- Mastercard
- Visa
- Check *Make checks payable to Yonkers Tennis Center

Fees Paid

- Deposit \$200
- Balance \$299
- Match Fees \$ _____

Total Fees Paid \$ _____

Credit Card # _____ Exp. _____

Player Signature _____ Date _____