



Application for Season 2021-2022

For Official Use Only	Total No	Amount Due
Admin Fee		
Total		

Form to be filled in Block Capitals

Name of Tennis Club

Please complete this section in full

Contact Person	Address	Mobile Home/Work
Contact Email Address:		

Does your Club have a Current Public Liability Insurance policy
Is Fingal County Council specifically indemnified on your policy

Yes/No
Yes/No

Insurers	Policy Start Date	Expiry Date	Policy No

I hereby certify that I have read and accept the Conditions of Pitch Allocation and certify that the information contained within this application is true and I agree that any inaccuracies regarding the information or breach of the conditions may result in your school having its allocation for all its teams withdrawn for a period of up to one calendar year.

Signature of School Official making application: (please note, all correspondence will be directed to this person)

Signature: _____ **Position Held:** _____

Block Capitals _____

- | | | |
|---------------------|---------------------------------------------------------------|--------------------------|
| Check List : | 1. Completed Application Form | <input type="checkbox"/> |
| | 2. Letting Fee | <input type="checkbox"/> |
| | 3. Insurance (with indemnity to Fingal County Council) | <input type="checkbox"/> |

Tick as appropriate

Tá leagan Gaeilge den fhoirm seo ar fail