

SOUTH MANDURAH TENNIS CLUB

PO Box 5175 FALCON WA 6210

ABN: 95 419 053 962

Website: www.southmandurahtennis.com.au



TENNIS FOR ALL

Expressions of Interest

Participant Name: _____

Age (In Years): _____

Carers Name: _____

Contact Details: _____

Participant Availability

| Day | Monday | Tuesday * | Wednesday | Thursday | Friday | Saturday |
|------|--------|-----------|-----------|----------|--------|----------|
| Time | | | | | | |

- Please note Tuesday will not be available until February 2022
- Sessions will be to suit coach availability. Not all days and times will be available
- Sessions will be approx. 45 minutes duration

Participant Dietary requirements: _____

Participant photos: Yes No

Photos to be used in media: Yes No

For further information please contact:

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Program Funding Partner



Department of
**Local Government, Sport
and Cultural Industries**