## 2024 PICKLEBALL MEMBERSHIP APPLICATION

Name: $\qquad$
Mailing Address: $\qquad$
City, State, Zip: $\qquad$ POA Membership\# $\qquad$ Phone\# $\qquad$
E-Mail Address $\qquad$

Membership includes access to all Pickleball Courts and access to Swimming Pools (East \& Main)

POA MEMBERS
Individual
Family

Annual
\$ 250
\$ 350

Monthly
\$25
\$ 35

## NON-POA MEMBERS

Individual
\$ 400
\$ 40
Family
\$ 525
\$ 55
*Family constitutes the property owner, spouse, and unmarried dependent children less than age 21.

NOTE: Membership Fees will be reduced by 10 \% if paid in advance for the year
Payment to be submitted by January 31, 2024.
Please disclose the Category of Membership that you are applying for: $\qquad$
( ) I choose to pay annually. I have enclosed a check payable to the POA: \$ $\qquad$
( ) I choose to pay monthly by ACH and have attached the required form.
Forms for ACH are available online (www.diamondheadms.org).
If you are currently on ACH , please authorize continued processing.
Authorization Granted: $\qquad$
( ) Payment submitted by Credit Card: $\qquad$
SIGNATURE: $\qquad$ DATE: $\qquad$
DATE: $\qquad$ CHECK\#: $\qquad$ AMOUNT: $\qquad$

Please return this Application and Payment to the Tennis Club Staff or directly to:

