

**APPLICATION  
PLATFORM TENNIS AT LAKEVILLE, CT  
2012-2013**

NAME(S) \_\_\_\_\_

DATE \_\_\_\_\_

MAILING (P. O. Box or Street) ADDRESS (local and other)

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PHONE \_\_\_\_\_

E-MAIL (important) \_\_\_\_\_

FEE (circle one)

INDIVIDUAL	\$50
FAMILY (couple and/or children)	\$75

Please make checks payable to "TOWN OF SALISBURY"

SEND TO:     **JANE KEITER**  
                  **36 LONG POND ROAD**  
                  **LAKEVILLE, CT 06039**

**The Paddle Committee:**

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**Recreation Commission Contact:**

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