



AFFIDAVIT OF DOMICILE for ADULT PLAYERS

I, _____ being duly sworn upon my oath,
deposes and states as follows:

1. (Full name) _____
I have personal knowledge of the matters stated in this Affidavit of Domicile and I affirm that all of the following statements are true and correct.
2. USTA#: _____
3. Employment status:
Employer: _____

Location: _____
4. State Address of Domicile: (Domicile is hereby defined as the bonafide, true and permanent home)
Street Address: _____
City: _____ ST: _____ Zip: _____
5. State Address(es) of All Other Homes:
Street Address: _____
City: _____ ST: _____ Zip: _____
(Additional Addresses of All Other Homes may be Submitted on Back of Page)

I understand that any falsification of the foregoing information will result in a minimum one-year revocation of adult tennis privileges in the USTA/Midwest Section for the above named Player.

Signature

Date