



Associate - Membership

The Associate Member receives:

Annual Dues: \$295

Tennis Marketplace Reports - (Annual):

Executive summary of all TIA research and market intelligence reports. Each report includes an overview from our tennis participations, consumer report, specialty retail audit, dealer trends and census reports. Issue: Annual Size: avg. 12-16 pages each report

Executive Summary of the Tennis Health Index - Description: executive summary of the full report conducted annually on Tennis Participation trends by the USTA & TIA along with player profiles and demographics - over 25,000 interviews

Cost of Doing Business Report - Facility, Retailer or Court dependant on member type selection -

- o Comprehensive study of operational data for tennis facilities or retailers or court contractors. Data presented where possible by region and type of business
- o Range of revenue expectations (mean, upper, lower quartile)
- o Range of expenditure (mean, upper, lower quartile)
- o Amount of floor/wall space allocated to racquets, footwear, apparel, accessories.
- o Business ratios:
 - Revenue per square foot
 - Revenue split for services & equipment sales
 - % of gross revenue spent on: rent, utilities, salaries/wages, insurance, repairs and Maintenance
 - Stock turns by product group
- o Capital expenditure plans
- o Pay structure for staff (employed, contract, hourly etc)

TennisConnect.org Standard (add \$100) - *The Industry Leading Software for Tennis Facilities*

- o Website Builder
- o Member Matching
- o Group email engine



TENNIS INDUSTRY ASSOCIATION
1 Corpus Christie, #117, Hilton Head Island, SC 29928
Tel: 843.686.3036 Fax: 843.686.3078

Associate - Membership Application

Company Name: _____

Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Company Web: _____

Annual Dues: \$295

Initial set up fee of \$150 will be billed separately if receiving TC Standard

Membership Type: Facility: ___ Retailer: ___ Court: ___

___ I also want TennisConnect *Standard for \$100*

Please mail check with this form or fax credit card info to: 843.686.3078

Payment Method: ___ Check Enclosed Credit Card: ___

Credit Card Number: _____

Expiration Date: _____ **CSV #:** _____ **Card Type:** _____

Signature: _____

To authorize the Tennis Industry Association, (TIA) to debit my credit card annually for Membership please sign below.

Signature: _____
