



**NEW JERSEY
CHAPTER**
CLUB MANAGEMENT
ASSOCIATION OF AMERICA



Past Presidents Pickleball Outing

**Tuesday, April 8, 2025
Orange Lawn Tennis Club**

REMITTANCE FORM

CLUB NAME _____

MEMBER NAME: _____

ATTENDEE FULL NAME: (Please Print)

Please indicate if

Playing & Reception

Reception Only

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Registration Fees:

Players: \$105 per person

Reception Only: \$75 per person

Please make your check payable to NJ CMA and send your check and form to:

**NJ CMA
PO Box 549
Franklin Lakes, NJ 07417**

Amount Enclosed: _____