

**\$5**  
**YEARLY MEMBERSHIP**

# Social Membership Application

Cleveland Bowls Club Inc. t/a  
**CLEVELAND BAYSIDE CLUB**  
164 Middle Street Cleveland



Member # \_\_\_\_\_

**USE BLUE OR BLACK PEN ONLY**

Please circle: Mr Mrs Ms Miss Other \_\_\_\_\_

Given Names \_\_\_\_\_ Surname \_\_\_\_\_

Address \_\_\_\_\_ Postcode \_\_\_\_\_

Postal Address \_\_\_\_\_

Mobile \_\_\_\_\_ Landline \_\_\_\_\_

Email \_\_\_\_\_ DOB \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

**Note: Proof of identity and date of birth are required for all applications**

*Public Liability: Cleveland Bowls Club Inc has public liability insurance up to \$20 million*

## Declaration of Applicant

I hereby apply for social membership of Cleveland Bowls Club Inc. I declare that I am over the age of 18 years and, if accepted, I agree to abide by the Constitution and By-laws and all other rules and directions that may be from time to time imposed by Club management. I acknowledge that my application is not final until it is approved by the Club Board or delegate. Should my application be refused or terminated I will forfeit my membership card and all entitlements including those that I have accrued prior to my membership being rejected or terminated.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Privacy Notice

By completing this membership application form, I acknowledge the following:

1. Cleveland Bowls Club Inc (CBC) collects the personal information about me included on this form. I understand that if this personal information is not provided it may result in CBC being unable to process and/or accept the membership application
2. CBC collects my personal information to inform me of its products and services, to provide discounts and special offers, to conduct research and to further develop its products and services
3. CBC will take reasonable steps to protect my personal information that they hold about me from misuse and loss and from unauthorised access, modification and disclosure
4. I understand that CBC, at times, will disclose personal information to their service providers including Australia Post and mail houses in a manner and purpose that conform with the Privacy Act
5. I understand I may contact the Club to access or correct my personal information, to stop CBC from sending me information about their products and services, seek clarification on this privacy notice or if I have a complaint.

## Office Use Only

Date \_\_\_\_\_ Receipt No \_\_\_\_\_

Amount Paid \$ \_\_\_\_\_

Cash Eftpos Other (Circle one)

## Proof of Identity Sighted

Drivers Licence Passport Other (Circle one)

ID Number \_\_\_\_\_

Received by: \_\_\_\_\_

Entered by: \_\_\_\_\_