



# CLEVELAND BOWLS CLUB INCORPORATED



MEMBERSHIP APPLICATION  *or* CHANGE OF DETAILS

NEW  EXPERIENCED

MALE  FEMALE  JUNIOR

**\$10 Nomination Fee Received**

by .....

on ...../...../.....

**PLEASE PRINT CLEARLY**

**Mr Mrs Miss Ms (Please Circle)**

Surname .....Christian Names.....

Preferred First Name .....Address.....P/Code.....

Dob...../...../.....Ph.....Mob ..... Email.....

Emergency Contact Name.....Ph/Mob.....

Do you require coaching? Yes/No *If yes, you will be contacted - coaching is compulsory for new bowlers, who can receive up to six free coaching sessions before committing to joining the Club*

Occupation/Past Occupation .....

Are you able to volunteer for roles in bowls administration/coaching/umpiring/other?.....

Would you like to receive our Club Newsletter electronically? Yes/No

Have you ever been refused admission or expelled from another Bowls Club? Yes/No

*Membership fees are calculated quarterly. Would you like your membership to begin from:*

**1 July/1 October/1 January/1 April (Please circle)**

*This Section to be completed if you have been a bowler at another Club:*

**First Bowls Club and Year Commenced.....**

**Are you currently a Member of another Bowls Club? Yes/No**

**If yes, you must attach Clearance Form from (Club Name).....**

**Do you intend to remain a member of that Club? Yes/No**

**For which Club will you declare? Cleveland/Other (specify).....**

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

Signature.....Date.....

NOMINATED BY.....No.....Sig.....

SECONDED BY.....No.....Sig.....

**APPROVED: BRANCH SECRETARY ..... BOARD SECRETARY .....**

Office Use Only: Membership Number: .....

Invitation letter sent ...../...../.....

Member Type: Male/Female New/Transferred In/Rejoined Full/Junior/Non-Declared

Subscription Received ...../...../.....