



SOCIAL MEMBERSHIP

Paradise Point Bowls Club Application Form

Membership \$6.00 (Financial Year) or \$25 for 5 Years

TITLE Mr Mrs Ms Miss (Please circle)

SURNAME _____

FIRST NAME _____ MIDDLE INIT _____

DATE OF BIRTH ____/____/____ (If you wish to receive Birthday Vouchers)

POSTAL ADDRESS _____

_____ STATE _____ P/CODE _____

TELEPHONE (HOME) _____

MOBILE _____

EMAIL _____ @ _____

PREFERRED NOTIFICATION OF EVENTS Mail Email SMS

SIGNATURE OF APPLICANT _____

DATE OF APPLICATION ____/____/____

This information will be treated in the strictest of confidence.

OFFICE USE ONLY

MEMBERSHIP NO: _____ RECEIPTED BY _____

ID SIGHTED YES _____ NO _____ ID TYPE _____

MEMBER PROCESSED CARD ISSUED