

APPLICATION FOR MEN'S/LADIES BOWLING MEMBERSHIP (Please print clearly)

APPLICATION RECEIVED (DATE)		/ /			TIME						
SURNAME					GIVEN NAMES						
ADDRESS											
OCCUPATION		TELE	PHONE					DATE O	F BIRTH	/	/
E-MAIL											
EMERGENCY CONTACT NAME					EMERGENCY CONTACT PH						
I AM/WAS A FINANCIAL BOWLING MEMBER OF THEBowls Club											owls Club
ARE YOU CURRENTLY, OR HAVE YOU PREVIOUSLY BEEN UNDER SUSPENSION OR EXPULSION FROM ANY CLUB?											
QUALIFICATIONS	National Umpire	e () YES	0	NO If YES,		ES, U	Jmpire Badge No			
Accredited Coad		h () YES	0	NO	If YE	ES, U	mpire Ba	adge No		
Have you won a CLUB CHAMPIONSHIP) YES	0	NO						
A CLEARANCE CERTIFICATE must be supplied if you have been a member of another Bowls Club. Herewith CERTIFICATE No											
SIGNATURE					DATE	1	/	1			
We, FINANCIAL MEMBERS of the Paradise Point Bowls Club Inc, NOMINATE the MALE/FEMALE person named above, for MEMBERSHIP as defined in the CLUB CONSTITUTION. (Signature and PRINTED NAMES required).											
NOMINATOR					SECONDER						
PRINT NAME					PRINT NAME						
MEMBERSHIP NUMBER				MEMBERSHIP NUMBER							
SIGNATURE					SIGNATURE						
NEW BOWLERS: Beginners are required to be subject to testing by the OFFICIAL CLUB COACH (Appointed by the Club) before being allowed to take part in organised games. Please state whether you wish the Club to appoint a RQBA/QLBA Accredited Coach for your tuition. (Free)											
OFFICE USE ONLY					INVESTIG	ATING	сом		REPORT		
NOMINATION \$		R/NO				ATE	/	/	RQBA/QLE	BA LEVY	\$
SUBSCRIPTION \$		CAPITA	ATION				,		TOTAL		
RECEIPT NO.		DATE	/	/	M	IEMBERS	SHIP	NO.			
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