

BOWRAL BOWLING CLUB

MEMBERSHIP APPLICATION FORM 2023-24

PERSONAL DETAILS

Please write clearly. All fields must be filled out for valid membership to be processed.

MISS/MRS/
MS/MR

SURNAME:

FIRST NAME:

ADDRESS: _____

SUBURB: _____

POSTCODE: _____

POSTAL ADDRESS: _____

PHONE: _____

EMAIL: _____

DATE OF BIRTH: ____/____/____

OCCUPATION: _____

MEMBERSHIP TYPE

Full Bowling Membership \$160

Please note there is a one off \$10 admin fee for all new memberships.

Croquet Membership \$80

Social Membership \$15

I understand that this membership is valid until June 30, 2024

SIGNATURE: _____

DATE: _____

I, the applicant as named on this form fully understand that I cannot be elected as a member of this Club until the Board of Directors Meeting. I also understand that if for any reason the Board of Directors refuse the application, the membership fee will be refunded in full, and the Board is not required to give reason for non acceptance. If accepted, I hereby agree to abide by the Constitution, Rules and By-Laws which may be enacted from time to time by the Board and respect the rules of entry into the Clubhouse. I hereby declare that I am over the age of 18 years and that my personal details are true and correct.

PAYMENT METHODS

Cash

Direct deposit

Bowral Bowling Club LTD

BSB: 122-729

Credit card/EFTPOS
at the bar

Cheque

Account: 2215 0888

Please enter last name as reference

OFFICE USE ONLY

ID TYPE: DRIVERS LICENSE

PHOTO CARD

PASSPORT

ID NUMBER: _____

MEMBERSHIP N* _____

RCPT NUMBER _____

RCPT DATE _____

STAFF SIG. _____