



CLAREMONT BOWLS CLUB Inc.

Bourneville Crescent, Claremont 7011

Telephone: (03) 6249 2559

Facsimile: (03) 6249 9211

Email:claremontbowlsclub@bigpond.com.au

APPLICATION FOR MEMBERSHIP

I hereby apply for membership of the Claremont Bowls Club.

Signed..... Date...../...../.....

NAME Miss/Mrs./Ms./Mr.

ADDRESS.....

.....

PHONE NO. BUSINESSPRIVATE.....

MOBILE.....

EMAIL.....

OCCUPATION.....

Have you previously been a member of a Bowls Club YES/NO

If Yes, please complete the following:

Previous Club/s.....

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How many years bowls experience.....Yrs.

Positions played.....

MEMBERSHIP CLASSIFICATION APPLIED FOR

FULL PLAYING MEMBER SOCIAL PLAYING SOCIAL

JUNIOR NEW (1st Year) BOWLER

PARENT'S SIGNATURE (for juniors under 18)

PROPOSER'S SIGNATURE

SECONDER'S SIGNATURE

SIGNATURES OF TWO BOARD MEMBERS

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CLUB USE: Date Approved:.....Classification.....Date advised.....