

NEWPORT BOWLING CLUB LIMITED



APPLICATION FOR MEMBERSHIP Newport Beach Women's Bowling Club

.....
(Surname) (Preferred Name) (Initials)

Address

..... Post Code.....

Home Phone Work Phone Occupation

Birth Date/...../..... Partners Name

Name and phone number of person to be contacted in case of an emergency (if different from above).....

Are you a member of other Bowling Clubs ?. if 'yes', name of club(s)

Have you ever been suspended, expelled or asked to resign from any Club (Bowling or otherwise), and if so, what was the reason?

I am desirous of becoming a Full Associate Junior member (Tick)

DECLARATION

I, the above mentioned Nominee, do fully understand that I will be a provisional Member of the Club until my application is approved by a Board of Directors Meeting and by the Womens' Management Committee. If duly elected to the Club, I hereby agree to abide by the Constitution of the Newport Beach Women's Bowling Club.

Signature of Nominee Date/...../.....

Nominated by, Signature Print Name
Period of Acquaintance

Seconded by, Signature Print Name
Period of Acquaintance

FOR OFFICE USE ONLY

Received by.....Hon. Secretary...../...../.....

Approved by.....President...../...../.....

Approved by.....Coach...../...../.....

In accordance with our rules, all applicants for membership are dealt with by the Management Committee, the secret vote being applied. No reason will be given if your application is refused.