

AUSTRAL BOWLING CLUB

MEMBERSHIP APPLICATION FORM 2018

CNR Edmondson & Eighth Avenue
AUSTRAL NSW 2179
T. 02 9606 0412
W. www.australbowlingclub.com.au
ABN 67 000 485 218

(Tick appropriate box)

BOWLING MEMBERSHIP FEES (1 YEAR)

- NEW BOWLING MEMBER APPLICATION FEE \$70
*Application fee payable for all new bowling members
- FULL BOWLING MEMBER \$70
- PENSIONER BOWLING MEMBER \$55
- JUNIOR BOWLING MEMBER \$55

SOCIAL MEMBERSHIP

- ONE YEAR \$5 VALID UNTIL 31 DEC 2018
- THREE YEARS \$15 VALID UNTIL 31 DEC 2020

MR MRS MISS MS (Tick appropriate box)

SURNAME GIVEN NAMES

RESIDENTIAL ADDRESS
 POSTCODE

DATE OF BIRTH OCCUPATION

TELEPHONE: HOME WORK MOBILE

EMAIL

TO THE DIRECTORS OF AUSTRAL BOWLING CLUB LIMITED

SIGNATURE (Application is NOT valid unless signed) DATE

I declare that I am over the age of eighteen years and wish to become a member of Austral Bowling Club Limited.
If accepted, I request that you enter my name on the register as Bowling/Associate Member. I agree to be bound by your Memorandum & Articles of Association, Rules and By-Laws, from time to time in force. I acknowledge that despite receipt of a membership card I remain a provisional member until such time as the Board of Directors has accepted my application at their meeting. I understand that should my application not be accepted, for whatever reason, I must return the membership card.

OFFICE USE ONLY

PLEASE PROVIDE ONE OF THE FOLLOWING AS IDENTIFICATION:

- (a) CURRENT DRIVERS LICENCE NO EXPIRY DATE
- (b) RTA PROOF OF AGE CARD NO EXPIRY DATE
- (c) PASSPORT NO EXPIRY DATE
- (c) PENSION NO EXPIRY DATE

MEMBERSHIP NO AMOUNT PAID \$

DATE DATE OF BOARD MEETING WHEN ACCEPTED

ID SIGHTED & VERIFIED BY STAFF MEMBER