

FORSTER BOWLING CLUB LTD

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 ABN 39 963 747 288
 ACN 001 009 043

Membership Application Form

All applicants must join Forster Bowling Club Limited whether they intend to play lawn bowls or not. Membership is subject to the Constitution and/or Rules and By-Laws of the Forster Bowling Club Limited. All applicants must indicate what class of membership they wish to belong to:

<input type="checkbox"/>	MALE FULL BOWLING MEMBER	<input type="checkbox"/>	FEMALE FULL BOWLING MEMBER	<input type="checkbox"/>	SOCIAL MEMBER
<input type="checkbox"/>	MULTI BOWLING MEMBER	<input type="checkbox"/>	JUNIOR FULL BOWLING MEMBER	<input type="checkbox"/>	JUNIOR SOCIAL MEMBER

Parent must sign application below for junior membership

The Forster Bowling Club is subject to the provisions of the Privacy Act Amendment 2001. The personal information provided by you on this form/application and attached documents will be used to process your membership application. Failure to provide all of the requested information may result in your application being rejected. You have a right to access and correct any of your personal information that the Club holds about you. The Club does not disclose your personal information to any other organisation or person unless there is a legal requirement to do so. The Club may disclose your information to third parties that provide services under contract to the Club. These contracts require the third party to keep your personal information confidential and secure.

Do you wish to receive marketing material & information about our promotions & services? **YES / NO**

Do you wish to receive a Annual Report? **YES / NO**

Mr / Miss / Ms / Mrs
SURNAME GIVEN NAMES

Residential Address
STREET SUBURB POSTCODE

Postal Address (if different)

Occupation Date of Birth

Telephone (H) (W) (M)

Email

MALE FULL BOWLING/MULTI MEMBERSHIP APPLICANTS ONLY

Full Bowling Members: all members, men or women, who intend to bowl, or wish to have full voting rights. Bowling members have full use of the club and greens, the right to attend meetings and stand for office. **Junior Full Bowling Members:** a person under the age of 18 years. A junior bowling member shall be entitled to such of the playing privileges and to the use of such of the facilities of the club as the Board may determine. Shall not be entitled to attend and vote at General Meeting.

The following information is required:

Are you a member of a bowling club? **YES / NO**. If so which club

Have you ever been a member of any bowling club? **YES / NO**. If so which state

Do you intend to play bowls? **YES / NO**. If so how much experience do you have

Have you played in any Pennant matches for any other bowling club this year? **YES / NO**.
 If so name the club

Have you played in Club Championship matches with any other bowling club? **YES / NO**.
 If so which club

Have you won any Club Championships MAJOR SINGLES / MINOR SINGLES / PAIRS / TRIPLES / FOURS with any other bowling club? **YES / NO**.
 If so which club

What position are you considered most adept in the team in team play? LEAD / SECOND / MEASURER / CAPTAIN.

Have you ever been expelled, suspended or asked to resign from any club? If so name the club

Your name and telephone number will be listed in a diary available to other bowling members for contact purposes only. If you do not want your contact information made available please write NO here

Note: Any new member cannot attend any meeting of the club unless they have been a member of the club for more than 21 days prior to such meeting.

SIGNATURE OF APPLICANT DATE

Must be parent's printed name and signature for junior membership

OFFICE USE ONLY:

Date received M/Ship # Receipt #

I.D. SIGHTED: SIGN.

UPGRADE TO BOWLING MEMBER: APPROVED BY..... DATE:.....

FEES PAID TO: RNSWBA \$.....MDBA \$..... FWBC \$..... CLEARANCE RECEIVED.....

Membership Application Approved by Board of Directors: / /

**Forster Women's Bowling Club
Membership Nomination Form**

Date:

Hon Secretary,

Dear Madam,

We, the undersigned wish to submit the following
nomination for membership,

NAME: _____

to be known as _____

ADDRESS: _____

PHONE: _____

Club with which affiliated (if any) _____
Clearance is required within 14 days of being accepted,
(if applicable)

I hereby signify that the above particulars are correct:

NOMINEE _____

NOMINATED BY: _____ M/SHIP NO. _____
(Full Female Bowling Member)

SECONDED BY: _____ M/SHIP NO. _____
(Full Female Bowling Member)

Please apply break-up of fees below.

FBC	\$
DISTRICT	\$
NSW	\$
FWBC	\$
TOTAL	\$ _____