



**CLAREMONT BOWLS CLUB INC**

ABN 29 250 497 952

**1 Bournville Cres, Claremont TAS 7011**

**claremontbowlsclub@bigpond.com.au**

**Telephone: (03) 62 49 2559**

*“Get Down and Get With It”*

**APPLICATION FOR MEMBERSHIP**

I hereby apply for membership of The Claremont Bowls Club Inc. (please print legibly)

Signed:.....Date: / /

Full Name: Miss/Mrs/Ms/Mr.....Date of Birth / /

Address:.....Post Code:.....

Phone Number Private:.....National ID Number:.....

Mobile:.....Email:.....

Occupation:.....

Close Contact: (Optional) NAME:.....NUMBER:.....

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

If Yes, please complete the following:

Previous Club/s.....

How many years bowling experience:..... Recent Positions Played:.....

Have you ever been suspended or had your membership terminated at any club YES/ NO

**MEMBERSHIP CLASSIFICATION APPLIED FOR (Please tick)**

FULL PLAYING MEMBER

SOCIAL PLAYING

SOCIAL MEMBERSHIP

JUNIOR ( U 18yrs)

5 GAME MEMBER

Parents Signature (for juniors under 18).....

Proposers Name:.....Signature.....

Seconders Name:.....Signature.....

Signature of two Board Members: .....

.....

**CLUB USE:** Date Approved: ..... Classification:.....Date Advised: .....