

PERTH WEST END BOWLING CLUB
MEMBERSHIP APPLICATION.

(PLEASE COMPLETE IN BLOCK CAPITALS)

I consent to my contact telephone number and email being displayed on Club Notice Board - **Agree YES / NO**

I hereby make application to become an **Ordinary / Social / Junior member** of the Club.

I am **Male / Female.** (Please delete as appropriate.) Date of Application

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NAME:

ADDRESS-----

PHONE-----

EMAIL-----
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ARE YOU A MEMBER OF ANOTHER BOWLING CLUB YES / NO

IF YES PLEASE GIVE DETAILS

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**ARE YOU RETAINING YOUR MEMBERSHIP OF THIS OTHER CLUB
YES/ NO**

**PLEASE INDICATE WHICH CLUB YOU WILL BE REPRESENTING IN
COMPETITIONS**

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APPLICANTS SIGNATURE

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NB

**THIS COMPLETED FORM MUST BE DELIVERED TO THE CLUB
SECRETARY.**