

WELFORD-ON-AVON BOWLS CLUB APPLICATION FORM FOR MEMBERSHIP

Name:

Address:

.....

Post code: Telephone Number:

E-mail Address:

Date of Birth: Registered disabled? Y / N

Are you a member of another outdoor and/or indoor club? Y / N

If so please state name(s)
.....

Outdoor

Indoor

I hereby apply for membership of Welford Bowls Club and if accepted agree to abide by the Rules and Regulations of the club. I give my consent under the Data Protection Act for the information contained herein to be processed and stored on computer and paper file by the club.

Membership Type	Annual subs	Swipe Card*	Total due	Tick type required
Outdoor	£75.00	£3.00	£78.00	
Indoor	£45.00	£3.00	£48.00	
Junior	£10.00	£3.00	£13.00	

For security purposes your signature at the bottom of this form confirms your agreement to abide by the declaration below.

I understand that the card remains the property of Welford Bowls Club. I must return it to the Club Secretary when I resign my membership or am asked to do so by a member of the committee. I agree to abide by the rules governing its use as follows:

1. I will retain the card in my possession at all times.
2. I will not use the card to admit people to the club unless I accept responsibility for them and:
 - a. I know they are paid up members;
 - b. They are my guests and I enter them in the visitors book;
 - c. They can demonstrate that they are visiting on official business.
3. I will report any loss or theft of the card immediately to the Club Secretary.

I enclose the sum of £..... to cover my first year's membership, together with money for a swipe card deposit. This money will be refunded if the application is refused.

Signed:.....

Date:

Proposed by:.....

Signature:

Seconded by:.....

Signature:

Office Use Only:

Membership Accepted: Signed: Date: Membership No: