

WELFORD-ON-AVON BOWLS CLUB APPLICATION FORM FOR MEMBERSHIP

I hereby apply for membership of Welford Bowls Club and if accepted agree to abide by the Rules and Regulations of the club.

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

Welford on Avon Bowls Club relies on the legitimate interest basis to use the personal information you supply in order to provide you with the Benefits of Membership. The Benefits of Membership can be found in the New Member's Handbook.

I give my consent under the General Data Protection Regulations (GDPR) for the information contained herein to be processed and stored on computer authorised by the club and also paper files kept by the club under the Club's Privacy Notice.

If you would like to find out more about how we keep your details safe and how the information you give us is used, then please read our Privacy Notice which is available on our website or in 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	

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 not use the card to admit people to the club unless I accept responsibility for them and I know they are paid up members; they are my guests and I enter them in the visitors book; they can demonstrate that they are visiting on official business.
2. I will report any loss or theft of the card immediately to the Club Membership 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: