Queanbeyan RSL Memorial Bowling Club Inc

PO Box 388
Queanbeyan NSW 2620
Phone: 02 6297 2344

ABN 19473724053
1C Yass Road
Queanbeyan NSW 2620

BOWLING AND FULL VOTING MEMBERSHIP APPLICATION

Financial Year 01 July – 30 June

Please Tick

- ☐ FULL BOWLING MEMBERSHIP $140.00 INCLUDES GST
- ☐ FULL PENSIONER BOWLING MEMBERSHIP $110.00 INCLUDES GST
- ☐ FULL VOTING MEMBERSHIP $40.00 INCLUDES GST

I Mr/Mrs/Ms/Miss/Other: .....

GIVEN NAME: ..... SURNAME: .....

HOME ADDRESS: .....

SUBURB: ..... STATE: ..... POSTCODE: .....

CONTACT NO. HOME: ..... MOBILE: .....

EMAIL: .....

DATE OF BIRTH: .....

IDENTIFICATION: LICENCE OR 18 PLUS ID CARD: .....

It is important that where the applicant has been a member of another Bowling Club that they are in the possession of a Clearance Certificate from the other club.

THE FOLLOWING INFORMATION IS REQUIRED:

Are you a member of a Bowling Club?.....
Do you intend to play Bowls?.....
Have you been suspended, expelled or asked to resign from any Club?.....
If so please state which Club/Clubs:.....

I hearby apply for membership to the Queanbeyan RSL Memorial Bowling Club Inc. I accept that this application is provisional and upon my application being granted I will abide by the Articles of Association, Rules and Bylaws of the Club. NOTE THE ARTICLES GOVERNING MEMBERSHIP ARE: - ARTICLES 13-43 of the Articles of Association of the Queanbeyan RSL Memorial Bowling Club Inc.

DATE: ..... NUMBER GIVEN: .....

Signature of Applicant: .....

Proposer: ..... Badge No: .....

Seconded: ..... Badge No: .....