TOTNES BOWLING CLUB APPLICATION FOR MEMBERSHIP

Full ☐ Under 18 ☐ Under 25 ☐ Social ☐

Title: Mr Mrs Ms Other (Please circle as appropriate)

Name:……

Address:……..

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……Post Code:……..

Date of birth (if under 25) ……/……/…….

Parent or Guardian Consent if applicant is under 18.
Name:……Signature:……..

Tel No Home::……Mobile: ……

Email Address:…….

Details of previous bowling experience and any previous bowling clubs:

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Emergency Contact Details. Name:…….

Relationship:……Contact No:……

Applicant Signature:……Date:……(See note below)

Proposed by: (print)……

Signed:……Date:…….

Seconded by: (print)……..

Signed:……..Date:…….

Note: By signing this application form you authorise Totnes Bowling Club to hold your details securely and email some of them to the current club membership as part of our approval process. You also approve the use of any images of you taken at the club to used within our website or facebook page.

Do you have any non bowling skills that could contribute to the running of Totnes Bowling Club?

Details……

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