

NEW MEMBER APPLICATION

TYPE OF MEMBERSHIP APPLYING FOR (Please indicate)

FULL	DUAL	SOCIAL	SCHOLAR
Surname:	Full Names:		
BSA Number:	ID Number:		
Postal Address:			
		Code:	
Residential Address:			
		Code:	:
Tel Numbers: Home		Work:	
Cell No:	E-Mail:		
1. Are you, or have you even	r been a member of a Bowli	ing Club(s)? YES NC)
2. Name of present or form	er club:		
3. Are you in good standing	with the above Club(s):	YES NO	
4. Marker's Badge No	Umpire Badge No and Lev	velCoach's Badge	e No and
Level			
5. What position are graded	1 in:		
6. Who introduced you to B	owls (Novices only):		

I understand that my personal information will be captured and processed on the Bowls South Africa Website which is accessible to BSA, Provincial and Club Administrators (*Information Officers*) only and that it will not be a public record. I understand that CBCOB Bowling Club has the right to put my name and contact number on the Notice Board so that I can be contactable by others Members should the need arise. I undertake not to abuse the contact detail of Club Members and to use it for Club related matters only. For the purpose of communication, I prefer to receive communication regarding BSA, BGN or Club matters via: (please initial across your choice(s) of communication. You may also, from time to time, be added to other WA Groups relating to specific actions in Bowls, i.e. Club Competitions, Tournaments etc.

E Mail	WA (CBCOB Club Group)	SMS

Applicant will be notified by the Club Secretary of his or her acceptance as a Member. The Club Treasurer will notify the applicant of the amount of fees due to become a Member and will the Member will only be registered once proof of payment was received.

Applicant's Signature: .	
Proposer's Name:	Signature:
Seconder's Name:	Signature:
Date on Notice Board:	
Approved: YES NC	Date: