



St Lucia Bowling Club Inc

Application for Full/Junior/Associate Membership

I hereby make application to become a FULL / JUNIOR / ASSOCIATE Member of the St. Lucia Bowling Club inc, and if accepted, agree to be bound by its Rules and By-Laws

***** PLEASE PRINT CLEARLY *****

SURNAME.....GIVEN NAMES.....

ADDRESS.....SUBURB.....

POST CODE..... PHONE.....DATE OF BIRTH.....

I PREFER TO BE CALLED.....PRESENT OCCUPATION.....

Are you presently a Member of a Bowls Club? Yes/No. Name of Club.....

What Bowls Clubs have you been a member of in the past?.....

What offices have you held in a bowling club or a District Association?.....

Have you won a Club Championship singles?.....Year and where.....

Pairs?.....Triples?.....Fours?.....

Are you a qualified umpire?..... coach?.....

How introduced to the Club?
e.g. Open day, Friend, Advertisement etc.

I DECLARE that I have never been and am not currently under notice of suspension or expulsion from membership of any bowls club or bowls association and I AUTHORISE the St Lucia Bowling Club, other bowls clubs, District Bowls Associations, Bowls Queensland and Bowls Australia to exchange information about me relating in any way to my membership with this club or any other club (including but not limited to previous suspensions, expulsion, conduct prejudicial to the interests, image or welfare of the club, the relevant Bowls Associations or the game of bowls and the like)

Applicants Signature.....Date.....

Nomination fee is \$20 payable on application. If you are accepted for membership, your Annual Subscription will be assessed on a pro rata basis. Our subscription year commences on 1st June.

Proposed by.....Seconded
Please Sign & Print Please Sign & Print

How long has applicant been known by Proposer ?.....

CLUB USE: Interviewed by.....
Recommendation/Comments.....
Nomination Fee received \$ Membership No.....
Approved by CouncilDate / / rev 4/08