

APPLICATION FOR MEMBERSHIP

I hereby apply for Membership of the Sutherland Bowling & Recreation Club Ltd T/a Club Kirrawee

Ordinary Bowling Member Social Member

I declare that I am over the age of 18 years, and if elected to Membership, agree to abide by the Constitution.

I agree that the Board of Directors shall be empowered to terminate my Membership if, in their opinion, my answers to the questions herein, or put to me by the Board of Directors are untrue or misleading.

Title: Mr / Mrs / Miss / Ms

Surname First Name

Address

Suburb P/Code

Phone (H) (B) M)

Email Date of Birth

Occupation (If retired, previous occupation)

Emergency Contact Phone

The following information is required to be completed:

Are you a member of another Club?

If so state Club or Clubs

Have you ever been suspended, expelled or asked to resign from any Club?

If so state Club or Clubs

Signature of Applicant Date

Signatures of Proposer Seconder

OFFICE USE ONLY

Identification Sighted: Driver's Lic: Other

Subscription: Receipt No Date Amount

Accepted as Ordinary Bowling Member Social Member



**CLUB
KIRRAWEE**

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