



# ASHFORD MEMORIAL BOWLING CLUB LTD MEMBERSHIP NOMINATION FORM

The applicant is required to complete the details below

Name in full \_\_\_\_\_

of address Street \_\_\_\_\_ Town \_\_\_\_\_ Postcode \_\_\_\_\_

phone Phone number \_\_\_\_\_ date of birth dd mm yyyy email \_\_\_\_\_

apply to become a  Full  Social  Junior member of the Ashford Memorial Bowling Club Ltd, subject to Rules and Bylaws of Ashford Memorial Bowling Club Ltd

### The following information is required:

Are you a member of a Bowling Club?  yes  no

If so, state Club or Clubs \_\_\_\_\_

Do you intend to play bowls?  yes  no

Have you ever been suspended, expelled or asked to resign form any club (bowling or otherwise)?  yes  no

If so, state Club or Clubs \_\_\_\_\_

Signature of applicant \_\_\_\_\_ date \_\_\_\_\_

Signature of Proposer \_\_\_\_\_ Period of acquaintance \_\_\_\_\_

Signature of Seconder \_\_\_\_\_ Period of acquaintance \_\_\_\_\_

Please return completed form and fee in person to Ashford Memorial Bowling Club, or post to: PO Box 48, Ashford 2361.  
 Membership fees: Social \$15, Full Bowling \$30, New Membership +\$5

**FOR CLUB USE ONLY**

MEMBERSHIP Accepted  yes  no Type  Full  Social  Junior

date    Member No

Membership rejected. Reason/s \_\_\_\_\_

\_\_\_\_\_