



## CLIFFE BOWLS CLUB MEMBERSHIP APPLICATION FORM



SURNAME:	FORENAMES:
ADDRESS:	
POSTCODE:	EMAIL:
MOBILE NO:	HOME NO:
OCCUPATION:	SHIRT SIZE:

HAVE YOU PLAYED BOWLS WITH ANOTHER CLUB		
<b>IF YES:</b>	YES	NO
PRESENT / PREVIOUS CLUB		
PLAYING POSITION		
NO OF YEARS EXPERIENCE		
COMPETITIONS WON		
REASONS FOR LEAVING		
<b>IF NO</b>		
OTHER SPORTS PLAYED		
WAS CLIFFE BOWLS CLUB RECOMMENDED TO YOU		
YES      NO		
IF YES - BY WHOM		

<b>DECLARATION:</b>	
As a new member of Cliffe Bows Club I understand that I will be expected to attend, at some stage, an induction evening at the clubhouse and as a 'new bowler' I will also be expected to attend coaching sessions.	
<b>Note:</b> As a member I also understand and accept that I will be required to undertake tea and cleaning duties along with other members of Cliffe Bows Club.	
APPLICANTS SIGNATURE:	DATE:
PROPOSERS SIGNATURE:	DATE:
(Note: if you do not have a proposer please contact the Secretary)	
NOTE: Applicants should be aware that the Cliffe Bows Club Committee reserves the right to accept any application or to grant membership subject to certain conditions	

SECRETARY'S NOTES: APPLICATION RECEIVED	DATE:
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ACCEPTED

YES / NO

CONFIRMATION SENT

DATE: \_\_\_\_\_