NEW MEMBERSHIP APPLICATION FORM

Ph (08) 9447 3077 secretary@nbbc.com.au www.nbbc.com.au
ABN: 30 486 514 300

Club Membership is for the period from 1st May to 30th April each year.

SURNAME: …… GIVEN NAME:……

ADDRESS:……SUBURB……..POST CODE ……

Contact details: Telephone (H)……..(M)……

E-Mail: Please print clearly. ……

Date of Birth: ……/……/…… Occupation……

Membership Classification Required: (Please circle one only)

Member: $190* Restricted Member: $100 Junior Member: $50

** Fee for new members to the club is $140 in their first year. Does not apply to returning members.*

Social Member: $25 per year for up to 5 years membership. Years: _____ Paid: $_____

Payment can be made at the bar or by direct credit to Beyond Bank BSB: 325 185 A/c # 03538430

Are you a Member or ex-Member of another Bowling Club? Yes [ ] No [ ]

If YES please name the Club_____ Last financial year _____

Are you under suspension or expulsion from any Club Yes [ ] No [ ]

If yes, provide details: _____

Do you wish to play PENNANTS Yes [ ] No [ ]

In accordance with the Constitution of the North Beach Bowling Club Inc. I hereby apply for entry as a Member of the Club. I will pay my subscription fee within one calendar month of acceptance of my application. I will conform with, and be bound by, the Constitution and by-laws of the North Beach Bowling Club Inc. If I decide to leave the Club for any reason, I will submit my resignation in writing

I give North Beach Bowling Club permission to use my e-mail address for information from the club.

Applicant's signature: _____Date _____

Applicants must be proposed and seconded by a (full) Member of the Club.

Proposed by (Name): _____ Signed_____

Seconded by (Name) _____ Signed _____

Office Use: Elected at Committee Meeting held on _____

Membership list ☐ *Mailing list* ☐ *Constitution received:* _____