

BABBACOMBE BOWLING CLUB
APPLICATION FOR MEMBERSHIP

Today's Date DD / MM / YY

Name (Print) _____

Address (Print) _____

Postcode (Print) _____ Telephone _____

Email address _____

Date of Birth DD / MM / YY

Bowling experience Please

I am a beginner. I have previous bowling experience :

_____ years indoor _____ years outdoor

Proposed by _____ PRINT _____ SIGN

Seconded by _____ PRINT _____ SIGN

I am applying for Full Social Junior
membership of the Club.

I consent to my details being kept on a computer by Officers of the Club and to the inclusion of my details in the annual Fixtures Book and on the list of members posted on the notice boards in the clubhouse. I also consent to this form being posted on the Club notice boards for fourteen days.

Applicant's signature _____

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