



HASTINGS BOWLING CLUB Inc.
NEW MEMBERSHIP APPLICATION

I the undersigned, (please print) _____

of Street Name _____

Town _____ State _____ Postcode _____

Telephone _____ Mobile _____

E-Mail Address

Date of Birth	Preferred Title	Mr	Mrs	Ms	Miss
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Do hereby apply for (please tick appropriate box)

Full	Dual	Social Plus	Social	Junior
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

membership of the **Hastings Bowling Club Inc.** and accept **and agree** to abide by the Constitution and By – Laws of the club.

Last Club (if applicable) _____ No of Years of Bowling _____

Please provide details of relevant bowling **qualifications**.

Coach - I/D	Expiry Date	Umpire –Measurer I/D	Expiry Date

I require Affiliation with Bowls Victoria	Yes	No
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Bowls Victoria Transfer completed (if needed)	Yes	No
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A \$20 NOMINATION FEE MUST BE PAID WITH THIS APPLICATION. It will be subtracted from the annual fees. After membership is approved, fees are payable within 30 days of receipt of your acceptance letter. If after 30 days the fees are not paid, the nomination fee is forfeited, and the membership is void.

Applicant's signature _____ Date _____

Proposed by (please print) _____ **(Signature)** _____

Seconded by (please print) _____ **(Signature)** _____

Only when all the above information, and the date displayed, receipt No and amount paid should this form be posted on the B.O.M noticeboard.

Date Displayed	Receipt No	Amount Paid	Approved Letter Sent	Fees Due	Affiliation Date	M.B.O. Date	Filed Date