

# MEMBERSHIP APPLICATION FORM

## CONSTANTIA BOWLING CLUB

I hereby apply for membership of the above Bowling Club and, if accepted, agree to conform to the Rules and Regulations of the Club, District Bowling Association and Bowls South Africa

FULL NAMES (Block Letters) .....

I.D. No: ..... Occupation: .....

Postal Address: -

.....

Postal Code.....

Telephone: (Home) ..... (Work) ..... Cell.....

**E-Mail address:** - .....

Present Occupation .....If retired Past Occupation.....

Proposer's Name: ..... Signature: .....

Seconder's Name: ..... Signature: .....

**Applicant's Signature:** ..... **Date:** .....

Other Bowling club/s of which Applicant is and / or has been a Member: -

Name of present Club..... Past.....

Number of years playing bowls..... Graded position.....

Are you an Umpire..... Are you a Coach.....

**NB: As a matter of policy, you will be allocated a preliminary grading which will be at least one ranking below your present grading. This will be amended once your level of play has been assessed by those responsible for grading. A Clearance Certificate must be attached.**

*The following are current fees, due immediately following acceptance of Membership and are not refundable upon termination of Membership for whatsoever reason.*

**SUBSCRIPTION: R1650. 00. W.P.B.A./BOWLS S.A. AFFILIATION: R350.00**

**If possible a brief CV of the Applicant's administrative and/ or playing record should accompany this application.**

**Before placing this application on the board, the Secretary is required to introduce the Applicant to the Membership committee on the first Friday at 5 pm after receiving a fully filled in application form.**

President  Club Captain ( Men )  Club Captain ( Women )   
Secretary  Selection Convenor (Men )  Selection Convenor (Women)   
Financial Controller

*Submission of this Application should not be construed as an acceptance of Membership, and no reasons will be given should Membership be refused.*