

SOCIAL MEMBERSHIP
APPLICATION FORM
CONSTANTIA BOWLING CLUB

I hereby apply for SOCIAL membership of the above Bowling Club. and, if accepted, agree to conform to the Rules and Regulations of the Club

FULL NAMES (Block Letters):.....

I.D. No: Occupation:

Residential Address:
.....

Postal Address:-
.....

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

E-Mail Address:-.....

Present OccupationIf retired Past Occupation.....

Proposer's Name: Signature:

Seconder's Name: Signature:

Applicant's Signature: Date:

It is the responsibility of the Proposer and Seconder to present the completed form to a member of the Membership Committee who will initially screen the form. The proposer and/or seconder will be asked questions about the applicant to establish how well they know the person that they have just proposed or seconded.

SUBSCRIPTION: R400.00

Before submitting this Application, the Proposer is required to introduce the Applicant to at least four of the following Club Office Bearers.

President	<input type="checkbox"/>	Club Captain (Men)	<input type="checkbox"/>	Club Captain (Women)	<input type="checkbox"/>
Secretary	<input type="checkbox"/>	Financial Controller	<input type="checkbox"/>	Committee Member	<input type="checkbox"/>

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