



KINGBOROUGH BOWLS AND COMMUNITY CLUB INC.

(ABN 35 916 407 706)

MEMBERSHIP APPLICATION 2023/24

PERSONAL INFORMATION

Name:

Address:

Post Code:

Phone:

Mobile:

Email:

D.O.B:

MEMBERSHIP TYPE

- Full \$360 1st Year transfer \$220 1st Year novice \$180
 Family \$345 (per individual) Junior (ref BOM) Special \$160
(Note: reduced rates available for Full and Special memberships commencing after December)

Signature of applicant:

Date:

- Beginner Bowler Experienced Bowler (Years played)

Previous Club(s)

We, the undersigned, being full and financial members of the KBCC do certify that, in our opinion, the Applicant is of good character and will be a responsible member if accepted:

PROPOSER Name:

Signature:

SECONDER Name:

Signature:

Application **APPROVED/REJECTED** at board meeting held on:

Signed (President):

Date:

OFFICE USE ONLY

Paid: Y/N

Receipt Number:

Card Issued: Y/N

Membership/Card Number:

ACTIONED BY:

DATE:

- Database updated Welcome letter sent Email list updated
 Card issued Bowlink actioned (Number:)