



# Currarong Bowling & Recreation Club

## Membership application

**PLEASE PRINT ALL INFORMATION**

Mr / Mrs / Miss / Ms (circle)

Last Name  Given Name

Email (required)

Residential Address

Suburb  State  Post Code

Postal Address (if different)

Phone (Private)  Phone (Mobile)

Occupation  Date of Birth

Licence Number

**PLEASE TICK THE TYPE OF MEMBERSHIP**

Club Membership		Sub Clubs							
		Fishing		Snooker & Darts		Golf		Bowls	
<input type="checkbox"/> 1 year	\$5.00	<input type="checkbox"/> 1 year	\$2.20	<input type="checkbox"/> 1 year	\$2.20	<input type="checkbox"/> 1 year	\$2.20	<input type="checkbox"/> 1 year	\$2.20
<input type="checkbox"/> 5 years	\$25.00	<input type="checkbox"/> 5 years	\$11.00	<input type="checkbox"/> 5 years	\$11.00	<input type="checkbox"/> 5 years	\$11.00	<input type="checkbox"/> 5 years	\$11.00

Disclaimer: I, the above-named nominee, do fully understand that I cannot be elected as a member of the Currarong Bowling and Recreation Club until the Board of Directors Meeting following the expiration of fourteen days from the date hereon. If duly elected to the club, I hereby agree to abide by the Memorandum and Articles Association of the Company.

Signature of applicant  Date

Exceptions to the above exist for junior members who are applying for membership of the club for participation in club sports and such nominations must be lodged by a parent or guardian.

**OFFICE USE ONLY**

Amount Received _____	Date Received _____	Number Assigned _____
ID Sighted <input type="checkbox"/> YES <input type="checkbox"/> NO		Date Processed _____
Staff Name _____	Staff Signature _____	Processed by _____