

CITY OF ELY BOWLS CLUB

APPLICATION FOR MEMBERSHIP

Name of Applicant : (Mr/Mrs/Miss)

Address

Post Code

Telephone Number

Age (If Under 18)

Occupation

Please indicate the section of membership you wish to apply for :-

Full Indoor

Full Outdoor

Junior (13 - 18 years of age)

Social (Payable by all non-playing visitors using the club facilities and having signed the visitors book on 3 previous occasions.)

All subscriptions are payable in September annually

Name of League Team if you are joining one :-

Proposer and seconder must be current club members

Name of Proposer

Name of Seconder

Signature of Proposer

Signature of Seconder

Signature of Applicant

Date

Please complete and return to the Club for display on the Club notice board for at least 48 hours prior to the next Management Committee meeting, when your application will be considered. Every applicant will be notified by post as soon as possible.

OFFICE USE ONLY

Date of Management Committee meeting :

Receipt no :