



PELHAMS BOWLS CLUB

Affiliated to Bowls England, Bowls Hampshire, B&D.B.A., B&D.W.B.A.

Bowling Green Pelhams Park Millhams Road Kinson Bournemouth BH10 7LH Ph.01202 572184

Secretary
Peter Blinkhorne

President
Mary Watts

APPLICATION FOR FULL MEMBERSHIP

NAME _____ **Please Circle: Mr / Mrs / Ms / Miss**

ADDRESS

POSTCODE _____ TEL No _____

E-MAIL ADDRESS _____

PREVIOUS CLUBS (IF ANY) _____

I am Under **60yrs.** Under **65yrs.** Under **70yrs.** Under **75yrs or over 75yrs**
Please circle which is applicable to you as ages are needed for Insurance purposes

PROPOSER _____ SECONDER _____

NAME (please print) _____ NAME (please print) _____

Please provide any relevant information regarding yourself or your bowling experience on the back of this form.

I wish to apply for full membership of Pelhams Bowls Club
I understand that I am bound by the Constitution and Rules of the Club and would like my application to be considered by the Management Committee. If accepted I understand that I shall be required to pay an annual subscription together with any other charges such as green fees, match fees and competition fees and shall be willing to carry out stewarding duties each bowling season at the Pelhams Bowls Club. If I am unable to fulfil these duties then I will personally arrange for a substitute to deputise for me.

Data Protection. To comply with current legislation members addresses and email addresses held by the club will only be used by the club for communicating with club members regarding club matters unless otherwise requested by the address holder. Members' data will not be shared with any other party. Members' names and telephone numbers will be displayed in the club handbook unless the member has requested otherwise.

SIGNATURE _____ DATE _____

Please return this completed form to the club secretary together with the relevant fees made payable to Pelhams Bowls Club.

Membership approved (yes/no) Signed _____

Date _____