

# NAMBUCCA BOWLS CLUB

## Membership Application

CLUB MEMBER			ADD AFFILIATION FEES FOR BOWLING MEMBERS (1 YEAR TO 31ST AUGUST 2022)		
CLUB FEE 1 YEAR (2022)			MALE BOWLING AFFILIATION		
CLUB FEE 3 YEARS (2024)			FEMALE BOWLING AFFILIATION		
<b>TOTAL AMOUNT PAYABLE</b>					

NAME (Mr, Mrs, Ms) First Name:- \_\_\_\_\_ Surname:- \_\_\_\_\_

DOB:- \_\_\_\_\_ GENDER:- Male Female

ADDRESS:- \_\_\_\_\_

SUBURB:- \_\_\_\_\_ STATE:- \_\_\_\_\_ POSTCODE:- \_\_\_\_\_

POSTAL ADDRESS:- if different from above:- \_\_\_\_\_

SUBURB:- \_\_\_\_\_ STATE:- \_\_\_\_\_ POSTCODE:- \_\_\_\_\_

PHONE:- (H) \_\_\_\_\_ (M) \_\_\_\_\_ (W) \_\_\_\_\_

EMAIL ADDRESS:- \_\_\_\_\_

DO YOU WISH TO RECEIVE AGM & MEMBERSHIP RENEWAL NOTICES VIA EMAIL?:- YES NO

DO YOU WISH TO RECEIVE SPECIAL MEMBER OFFERS AND PROMOTIONS VIA EMAIL:- YES NO

I hereby apply for membership of the Nambucca Heads Bowling & Recreation Club Ltd and if admitted I agree to be bound by and so comply with the constitution and by-laws of the Club. I also declare that I have attained the age of 18 years and the date of birth stated on this application is correct.

SIGNATURE:- \_\_\_\_\_ DATE:- \_\_\_\_\_

**NOMINATED BY:-** \_\_\_\_\_  
SIGNATURE PRINTED NAME MEMBERSHIP NUMBER

**SECONDED BY:-** \_\_\_\_\_  
SIGNATURE PRINTED NAME MEMBERSHIP NUMBER

Bowling Membership applications must be nominated by Bowling Members of the same gender as applicant

### BAR STAFF

PAYMENT METHOD IDENTIFICATION SIGHTED  
CASH EFTPOS YES

AMOUNT:- \_\_\_\_\_ TYPE:- \_\_\_\_\_

STAFF NAME:- \_\_\_\_\_ SIGNATURE:- \_\_\_\_\_

### OFFICE STAFF

RECEIPT NUMBER:- \_\_\_\_\_

MEMBER NUMBER:- \_\_\_\_\_

STAFF NAME:- \_\_\_\_\_

SIGNATURE:- \_\_\_\_\_

AMOUNT:- \_\_\_\_\_ DATE RECEIVED:- \_\_\_\_\_