



St Georges Basin Women's Bowling Club

APPLICATION FORM FOR "SOCIAL" MEMBERSHIP

NAME IN FULL:.....

ADDRESS:.....

PH. HOME:..... **DATE OF BIRTH**.....

PH.BUSINESS:..... **OCCUPATION**.....

MOBILE.....

I WOULD LIKE TO BECOME A SOCIAL MEMBER OF ST. G.B.C.C.W.B.C.
& ABIDE BY THE MEMORANDUM & ARTICLES OF THE COUNTRY CLUB LTD.

THE FOLLOWING INFORMATION IS REQUIRED.

SGB. COUNTRY CLUB MEMBERSHIP NO:.....

HAVE YOU BEEN A MEMBER OF ANY PREVIOUS BOWLING CLUB.....

IF SO, STATE CLUB OR CLUB NAMES.....

SIGNATURE OF APPLICANT.....

DATE.....

SIGNATURE OF ACCEPTOR.....

JOINING FEE FOR 2018/19 - \$30.00

FOR CLUB USE ONLY

Application for Membership Accepted:.....

Letter Sent:..... **Fees Paid:**.....