

APPLICATION FOR MEMBERSHIP of the
WAGGA MEN'S R.S.L. BOWLING CLUB

Applicants must be a member of the Wagga RSL Club Limited with
Card No.....(Card No. Must be filled out)

I, (Name in full) _____
(Print Block letters)

Of (Full Address) _____

Phone _____ email _____

Date of Birth _____ Occupation _____

Wish to become a (Tick applicable) -**Full Member** _____ **Multi Member** _____
Social Member _____ **Junior Member** _____

of the Wagga R.S.L. Bowling Club, subject to the Constitution of the RNSWBA and the Constitution and / or Rules and By-Laws of the Wagga R.S.L. Bowling Club.

The following information is required: Are you a member of another Bowling Club?
YES / NO (Delete one) If Yes, state Club(s) _____

RNSWBA No: _____

Please attach a copy of your **Player Clearance Form** if you have played for or been a member of another club within the last 12 months.

Have you ever been suspended, expelled or asked to resign from any Club. Yes No
If so state Club or Clubs _____

Please state Achievements attained at your last Club.

Pennants	Yes	No	Grade Played (circle) 1, 2, 3, 4, 5, 6, 7.
Minor (B grade) Singles	Yes	No	Major (A grade) Singles Yes No
Major Pairs	Yes	No	

I understand that I will not become a member of the Bowling Club until the Club Secretary advises me of my election to Membership after the next Committee Meeting.

Signature of Applicant _____ Date: _____

Name of Proposer: _____ RNSWBA No. _____ Signature: _____
(Print block letters)

Name of Seconder: _____ RNSWBA No. _____ Signature: _____
(Print block letters)

NOTE: Payment of Membership subscription to accompany this application.

Fully Affiliated Member (\$100) Social Member (\$40) Junior Affiliated Member (\$5)

(Fees will be refunded if your application is unsuccessful)

Application for JUNIOR MEMBERSHIP this part to be completed by the parent or guardian of the Applicant

(Full name & Address)

Being the Parent or Guardian of _____ hereby
Consent to this applicant participating in the sporting activities of the Club upon being elected to the Membership.

OFFICE USE: Receipt no _____ Clearances _____

Registration details _____

Acceptance letter Y/N. Club M/ship list Y/N. Other _____