

# Burnside Bowling Club Inc.

## Application for membership



I hereby apply to become a member of the Burnside Bowling Club. If accepted, I agree to abide by the Constitution and Rules of the Club and understand that the personal information disclosed may be used in accordance with the provision below.

### Type of membership

- |  |   |
|--|---|
| <input type="checkbox"/> Full playing member         | <input type="checkbox"/> Men's competitions   |
| <input type="checkbox"/> Full-time tertiary student  | <input type="checkbox"/> Women's competitions |
| <input type="checkbox"/> School student              |   |
| <input type="checkbox"/> Non playing (social member) |   |

### Personal details

Full Name	_____	Preferred Name	_____
Address	_____		
	_____	PostCode	_____
Email	_____	Phone	_____
Partner's name (optional)	_____	Date of birth (optional)	_____

### Playing experience (for Full Membership)

Previous or current club \_\_\_\_\_ (Please attach clearance certificate)

Playing experience \_\_\_\_\_ years

### Disclosure of information

Names, addresses and phone numbers will be included on membership lists, which may be displayed at the clubhouse and/or be circulated to other members. Names and addresses will be forwarded to Bowls Canterbury and Bowls New Zealand for record and sponsorship purposes, pursuant to clause 11.4 of the club's constitution.

Signature	_____	Date	_____
Proposed by	_____	Signature	_____
Seconded by	_____	Signature	_____

Applications can be submitted in person or:

Mailed to: The Secretary, Burnside Bowling Club, P.O.Box 31-028, Christchurch

Emailed to: [theclub@burnsidebowlingclub.com](mailto:theclub@burnsidebowlingclub.com)

Club use only:

Ph, Cl, DB, Em, Lt

Approved 1

Approved 2