## **BABBACOMBE BOWLING CLUB**

## **APPLICATION FOR MEMBERSHIP**

Today's Date:	Today's Date:
Name (Print)	Name (Print)
Address (Print)	Address (Print)
Postcode (Print)Telephone	Postcode (Print)Telephone
Email address	Email address
Birth year	Birth year
Please ☑ I am - Under 24 years*. ☐ Over 24 years ☐	Please ☑ I am - Under 24 years*. ☐ Over 24 years ☐
Bowling experience Please ✓	Bowling experience Please
☐ I am a beginner. ☐ I have previous bowling experience :	☐ I am a beginner. ☐ I have previous bowlin
years indoor years outdoor	years indoor years
Please ☑ I am applying for Full ☐ Social ☐ Junior* ☐ membership of the Club.	Please ☑ I am applying for Full ☐ Social ☐ membership of the Club.
I consent to my details being kept on a computer by Officers of the Club and to the inclusion of my details in the annual Fixtures Book and on the list of members posted on the notice boards in the clubhouse. I also consent to this form being posted on the Club notice boards for fourteen days.	I consent to my details being kept on a computer by Officers of the inclusion of my details in the annual Fixtures Book and on the posted on the notice boards in the clubhouse. I also consent posted on the Club notice boards for fourteen days.
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