

EDGE HILL MEMORIAL BOWLS CLUB				
APPLICATION FOR CLUB MEMBERSHIP 2021/2022				
I hereby apply for membership of EDGE HILL MEMORIAL BOWLS CLUB				
I declare that I am over 18 Years and agree to abide by Rules and By-Laws of the Club				
Mr	Mrs	Ms	Miss	(please circle)
Surname		First Name		
Nickname		MEMBERSHIP NUMBER		
ID TYPE AND NUMBER				
Address				
Postcode				
Postal Address		Postcode		
Telephone (H)		Mobile		
Email				
Date of Birth	Day	Month	Year	
Signature of Applicant				
Date of Application	Day	Month	Year	
This information will be treated strictly confidential in accordance with the Queensland Club Industry Code				
OFFICE USE ONLY				
Subscription fees applicable		(Please Circle)		
FULL MEMBER		\$130		
FULL MEMBER (Pensioner)		\$100		
FULL MEMBER (Not Affiliated)		\$60		
FULL MEMBER (Who is Dual or Declared for another Club)		\$60		
SOCIAL MEMBER		\$10		
LOCKER FEE		\$10		
RECEIPT Number				