

ASHFIELD BOWLING CLUB LIMITED
ASHFIELD PARK, ASHFIELD.
ABN 25 000 260 659
APPLICATION FOR MEMBERSHIP, SOCIAL

Family Name _____

Given Names _____

Residential Address _____

Suburb _____ Postcode _____

Telephone Private: _____ Business: _____

Mobile: _____ e-mail _____

Date of Birth: _____ Occupation: _____

I being the above person and who has signed this form below hereby apply for membership of Ashfield Bowling Club Limited. I agree to be bound by the Constitution and By-Laws of the Club. I wish to apply for the category of Social membership.

Have you ever been suspended or expelled from another Club? Yes/No

Do you wish to receive a hard copy of the Club's Financial Accounts? Yes/No

All applications for membership must produce Photo Identification.

Signature of Applicant _____

Club use only:

Application received / / Provisional Card Issued No:

Receipt No: Photo ID:

Approved by Board: / /