



CHRISTIES BEACH BOWLING CLUB INC.

2 Smith Avenue, Christies Beach SA 5165

Ph: 8382 8311 Email: christiesbeachbowlingclub@outlook.com

Website: christiesbeachbowls.com.au

APPLICATION FOR MEMBERSHIP

I wish to apply for the following category of membership – please circle.

Please note that a Social Bowler **MUST** be a full member of another Bowls Club and can use our greens for roll ups.

Full Associate Junior Student Social Social Bowler

Mrs Ms Miss Mr (please circle preference)

Name(s) Surname

Date of Birth/...../.....Email

Phone Mobile.....

Address:

Suburb Postcode

Occupation Do you intend to play pennants Yes/ No

Are you vaccinated in accordance with SA Health Guidelines.....Yes/No

Name of former Club (if any).....

Division played in Position(s) played

Have you applied for a clearance? Yes/ No

Social Bowler – Name of current Club

I agree to abide by the Club Constitution, Code of Conduct and all rules of the Christies Beach Bowling Club.

Signature:

Date:/...../.....

Nominated by: being a full member of CBBC

Seconded by: being a full member of CBBC

JUNIOR PLAYERS (18 or under)

Parent/Guardian’s signature.....Contact No

PRIVACY STATEMENT

In accordance with the Commonwealth Privacy Amendment Act 2000, personal information will only be used in accordance with the purposes of Christies Beach Bowling Club Inc and Bowls SA.

Office Use Only

Application received:

Membership type:.....

Application approved:.....

Clearance required:.....

Clearance finalised:.....

Approval letter sent:.....

Payment received:.....

Membership No. allocated.....

Vaccination Certificate sighted:.....

Details entered on system: