



# Application for Bowls Membership

Full Name: \_\_\_\_\_ Preferred Christian Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Date of Birth:        /        /        Occupation: \_\_\_\_\_ Membership: Full / Junior

**Members transferring from another club must provide a clearance.**

Transfer details:                      Name of Club: \_\_\_\_\_ Period at Club: \_\_\_\_\_

If you haven't previously played bowls, you are required to undergo a series of free coaching lessons.

A coach will be allocated to you before you take up membership.

Previous Coach: \_\_\_\_\_

If is it some time since you played, do you require further coaching? Yes / No

Have you at any time been suspended, expelled or refused admission to any bowls club? Yes / No

If yes, please give details \_\_\_\_\_

Are you an accredited coach or umpire?      Coach      Umpire      No

Please provide the name and contact details of a person to contact in the case of an emergency

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Proposed By: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Please print name)

Seconded By: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Please print name)

Signature of Applicant: \_\_\_\_\_ Date:        /        /

Please do not contact me regarding events, offers and specials

Please note: This application form will be displayed on the club notice board. A joining fee of \$11.00 is required to accompany this form. In accordance with the Associations Incorporations Act 1981 you are advised that Robina Bowls Club Incorporated trading a Club Robina has Public Liability Insurance, the amount of insurance/limit of indemnity being \$10,000,000.

**Office Use**

**Membership Director**

Fees Paid ..... Receipt # ..... Date Received ...../...../.....

Clearance Supplied YES / NO All details completed YES / NO

Application Approved / Not Approved

Letter setting out fees sent - Dated ...../...../.....

Membership #..... Card Printed ..... Membership Lists Updated .....

## Previous Or Existing Membership Of A Bowls Club

Previous Club Name & Address: \_\_\_\_\_  
 Telephone Number (If Known): \_\_\_\_\_  
 Clearance Attached/Required: \_\_\_\_\_  
 Position Previously Held: \_\_\_\_\_

**ACCREDITATION LEVEL**

Coach YES / NO      If yes, please provide certificate No.  
 Umpire YES / NO      If yes, please provide certificate No.  
 Have you won a master, singles, pairs, triples, fours event(s)? Please provide details below.

\_\_\_\_\_

If you are over 70 years of age, have you received your veterans badge? YES / NO

I DECLARE that I have never been and am not currently under notice of suspension from membership of any bowls club or bowls association and I authorise Robina Bowls Club, other bowls clubs, (whether or not affiliated with Bowls Queensland), District Bowls Associations, Bowls Queensland and Bowls Australia to exchange information (at any time whether or not I hold current club membership) about me relating in any way to my membership with the club or any other bowls club (including, but not limited to previous suspensions, expulsion, conduct prejudicial to the interest, image or welfare of the club, Bowls Queensland or the game of bowls and like. Please note:

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**Office Use**

Date on Notice Board ...../...../.....      Date Submitted/Approved by Board of Management ...../...../.....  
 Clearance followed up & checked with District Office    YES / NO  
 \$11 Joining Fee Receipt No. \_\_\_\_\_  
 Copy of Application to Board Secretary - Date ...../...../.....  
 Men's & Ladies Section - Date ...../...../.....  
 Coach \_\_\_\_\_ Coach Completed - Date ...../...../.....

**Fees Applicable**

Club Subscription (inc. GST) Pro Rata		\$ _____
Bowls Queensland	\$ _____	
GCT District	\$ _____	
Bowls Australia	\$ _____	
Bowls QLD (Admin)	\$ _____	
Affiliation	\$ _____	
<b>TOTAL AFFILIATION</b>	\$ _____	<b>TOTAL DUE \$ _____</b>