



Application for Membership

Beach Haven Bowling Club

Christian Name

Surname

Known As

Applicant:

Address:

Phone Number: Mobile Number:

Email Address:

Previous Club (if Applicable):

No of Years Played: Commenced: Grading:

Class of Membership:	Full	<input type="checkbox"/>	Associate	<input type="checkbox"/>
	Student	<input type="checkbox"/>	Social	<input type="checkbox"/>

For Student Membership Only (Up to & Including Tertiary Level Under 19 Years)

DOB: Age:

Next of Kin: Emergency Contact No:

I give permission to print my name and phone number in the Club Handbook and provide my contact details to Beach Haven Club Members Yes No

NOTE:- An applicant for Membership who is, or who has been, a member of another Club is required to include a Clearance Certificate from that Club with this Application Form. An application for membership will not be considered if a Clearance Certificate is not attached.

Proposed by: Seconded by:

Date: Signature of Applicant:

Membership Fees:

Full Member:- \$160: 1st Year Member:- \$80: Student Member:- \$40: Associate Member \$55: Social Member \$10

Payment must accompany the Application. The Executive Committee reserves the right to refuse Membership.

Date Received: Amount: Receipt No:

Date Approved: Date Registered:

Match Committee Notified:

Membership No.

Payment Options:- Cash at Club House/EFTPOS at Club House/ or.....
Direct Credit to:- 38-9020-0196005-00 - Reference:- Subs - *Surname and Initial*

Beach Haven Bowling Club Inc.

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