



MARINE GARDENS BOWLING CLUB

MEMBERSHIP APPLICATION FORM

PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS

FULL NAME OF APPLICANT:

ADDRESS:

.....

.....

POSTCODE:

TELEPHONE NUMBER: MOBILE NUMBER:

E-MAIL ADDRESS:

DATE OF BIRTH/...../.....

(NOT APPLICABLE FOR SOCIAL MEMBERSHIP)

I HEREBY MAKE APPLICATION TO THE GENERAL COMMITTEE FOR MEMBERSHIP AS A;

PLAYING / ASSOCIATE / SOCIAL/ MEMBER OF THE CLUB

(PLEASE DELETE AS APPROPRIATE)

PRESENT OUTDOOR CLUB HANDICAP

PLEASE STATE PREVIOUS CLUB MEMBERSHIPS

.....

Will you cease active involvement in any former Lawn Bowls Club? Yes/No

Membership implies willingness for "Active Participation" in Club affairs.

DATA PROTECTION ACT NOTICE. Data on members will be held by MARINE GARDENS BOWLING CLUB as a data controller for the purposes of maintaining its register of members and accounts. The Hon Secretary is the Club's representative under the Act. By paying the annual subscription you are giving consent for MARINE GARDENS BOWLING CLUB to keep information about you. Membership records will be kept for a minimum of ten years, or longer at the discretion of the General Committee.

SIGNATURE OF APPLICANT:DATE...../...../.....

PROPOSED BY:SIGNATURE:
(PLEASE PRINT NAME)

SECONDED BY:SIGNATURE:
(PLEASE PRINT NAME)

Please send completed application to:

Jenny Ashman, Hon. Secretary, 11 Kithurst Close, Goring by Sea, West Sussex. BN12 6AN

Membership will only commence upon payment of the appropriate subscription to the Hon. Treasurer. Players not in possession of a Worthing Borough Council season ticket must ensure appropriate green fees are paid at the session rate before playing.

FOR OFFICIAL USE ONLY

DATE APPLICATION RECEIVED BY HON. SECRETARY/...../.....

DATE APPLICATION CONSIDERED BY GENERAL COMMITTEE/...../.....

ACCEPTED/REJECTED

(PLEASE DELETE AS APPROPRIATE)