MT EDEN BOWLS (INC)



APPLICATION FOR MEMBERSHIP

17 Stokes Road	Ph	(09) 630 0427	P. O. Box 67 016
Mt Eden	Email	mtedenbowls@xtra.co.nz	Mt Eden 1349
Auckland 1024	www.mtedenbowls.com		
APPLICANT'S FULL NAME:		SIGNATURE:	
MEMBERSHIP CLASSES (circle one)			
(a) Full Bowling Member (\$120.00)		(c) Social Member (\$30.00)	
(b) Full Bowling Student Member (\$25) ((d) Student Social Member (\$5.00)	
	(e) Associate Member (\$60)		
ADDRESS:			
PHONE No: HOME		.WORK:	ИОВILE:
EMAIL ADDRESS:			

TODAY'S DATE:....

PROPOSER NAME:.....SIGNATURE:....

SECONDER NAME:.....SIGNATURE:.....

I HEREBY APPLY TO JOIN MT EDEN BOWLS (INC)

I AGREE THAT IF ACCEPTED AS A MEMBER. I WILL ABIDE BY THE RULES OF THE CLUB AND ADHERE TO THE CLUB CONSTITUTION

Full & Associate applicants MUST produce a CLEARANCE CERTIFICATE. Proposer and Seconder must be FULL members.

DISCLOSURE UNDEER PRIVACY ACT 1993

Personal details such as members' names, addresses, email addresses and phone numbers will be included on membership lists which are displayed in the clubrooms and/or circulated to other members.

As a condition of its affiliation to Bowls New Zealand, the club is required each year to forward details of the name, address, phone numbers, email and positions held if relevant.

They are kept for Centre handbook, levy requirements and for potential sponsorship.