



## BOWLING MEMBERSHIP APPLICATION

- |                          |                                     |                |                          |                                       |                |
|--------------------------|-------------------------------------|----------------|--------------------------|---------------------------------------|----------------|
| <input type="checkbox"/> | <b>Full Bowling Membership</b>      | <b>\$60.00</b> | <input type="checkbox"/> | <b>Full Pensioner Membership</b>      | <b>\$60.00</b> |
| <input type="checkbox"/> | <b>Full Lady Bowling Membership</b> | <b>\$60.00</b> | <input type="checkbox"/> | <b>Full Lady Pensioner Membership</b> | <b>\$60.00</b> |
| <input type="checkbox"/> | <b>Junior Membership</b>            | <b>\$10.00</b> |                          |                                       |                |

(You will be a financial Member of the Club until 30<sup>th</sup> of the year indicated on the front of your Membership Card)

**This asteric \* denotes required information – Please print**

Mr/Mrs/Miss/Ms \*Surname:.....\*Given Names.....

\*Residential Address.....  
.....Postcode.....

\*Mailing Address(if different to residential address):.....  
.....Postcode.....

\*Contact Phone Number(Home).....Work.....Mobile.....

\*Email.....Occupation.....

\*Date of Birth.....

\*Next of Kin.....Contact No.....

I would like to become a Bowling Member of Telarah Bowling Club Limited and request that my name be entered onto the Registration of Members. Accordingly, I agree to be bound by the Club's Constitution, Rules and by Laws made therein. I understand that my details will be displayed on the club notice board prior to acceptance of my application.

\*Signature of Applicant.....Date.....

\*Signature of Parent/Guardian:.....Date.....  
(Parent or Guardian only required for Junior Bowling Membership)

\*Nominators: We the undersigned wish to nominate the above person for Bowling membership of this Club.

1. Nominated by.....Member No.....

2. Nominated by.....Member No.....

### Office Use Only

Identification Type:.....Valid identification Number.....

Amount Paid: \$.....Date Paid.....Receipt No.....

Membership Number Allocated:.....Staff Signature.....Date.....

Note: Accepted forms of Identification are a Current Drivers License. Proof of Age. Passport or Birth Certificate

### Privacy Statement

Telarah Bowling Club (the Club) is subject to the provisions of the Privacy Act 1988. Any personal information provided by you to the Club will be used to process this application and will be protected. Failure to provide all the requested information may result in your application being rejected. You have a right to access and correct any of your personal information that the Club holds about you. The Club does not usually disclose your personal information to any other organization or person unless there is a legal requirement to do so. The club may disclose your information to third parties that provide services under contract to the Club. These contracts require the third party to keep your personal information, including information about you obtained as a result of you placing your Membership Card in a gaming or other club machine (not ATM) may be used by the Club for marketing purposes to improve our services and to provide you with the latest information about those services and any new related services or promotions.