



Mt Gravatt Bowls Club Inc.

1873 Logan Road, Upper Mt Gravatt, Queensland 4122, Australia
P.O. Box 34, Mt Gravatt, Queensland 4122, Australia
www.mtgravattbowls.com
Email: membership@mtgravattbowlsclub.com
Phone: (07) 3349 2367, Fax: (07) 3349 2787

MEMBERSHIP APPLICATION FORM

Mr. Mrs. Ms. Miss

Surname: _____ Given Names: _____

Address: _____ Postcode: _____

Date of Birth: ___/___/_____ Contact Numbers: _____

Email: _____ Do you require Coaching? Yes No

Next of Kin: _____ Next of Kin Contact Number: _____

Are you currently a member, or have been a past member of an affiliated Queensland Bowls Club or Interstate Bowls Club within twelve months of the date of this application? *Yes No

***If YES, a Clearance must be obtained from your present, or past club before your application can be processed.**

Name of Club: _____ Are you financial? Yes No

Number of years Bowling experience: _____ Pennant Division: _____ Preferred Position: _____

Championships won (if any): _____

I would like to receive club news and offers via email:

Conditions of Membership

I certify that: (a) I am not less than 18 years of age. (b) I am of good character, and I am prepared to support and promote the welfare of the Club and the Game of Bowls. (c) I am free of indebtedness to any Club, any District Bowls Association, or any State Bowls Association. (d) I am not under an order or notice of Suspension or Expulsion from any Bowls Club or Bowls Authority.

If this application is approved, I agree to comply with and be bound by the Club Constitution, By-Laws and Policies of the club. Copies of the Constitution and By-Laws are available on request.

An application fee of \$25.00 to accompany this form.

Applicants Signature: _____ Date: ___/___/_____

_____ **Photo proof of identification is required for ALL membership applications** _____

Proof of identity sighted: Drivers Licence: Passport: Other: _____

ID Number: _____ Received By: _____

Office Use Only

Application Fee Paid: ___/___/_____ Receipt No: _____ Former Member - Fee N/A:

Clearance Provided: Yes: N/A: Board Approved: ___/___/_____ Coaching Coordinator: Yes: No:

Approval Letter – Post: Email: Member No: _____ Subscription Amount: \$ _____

Subscription Paid: ___/___/_____ Receipt No: _____ POS: Bowls Qld: