

## 2017 BOWLING MEMBERSHIP FORM

I wish to **APPLY / RENEW** my **BOWLING MEMBERSHIP** with The Waverton North Sydney Club LTD, and provide herewith details of my application by completion of all cells applicable to my application.

**NAME:** \_\_\_\_\_ **BIRTHDATE:** \_\_\_\_\_  
Day / Month

**ADDRESS:**

<small>Unit/House Number</small>	<small>Street Name</small>	<small>Suburb</small>	<small>Postcode</small>
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**PHONE:**

<small>Home/Business</small>	<small>Mobile</small>
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**EMAIL:** \_\_\_\_\_

### ROYAL NSW BOWLING ASSOCIATION \$65

*\* Please fill out the Application for Registration which will be submitted to the Royal NSW Bowling Association by the Club.*

- Full voting rights
- Happy Hour
- Birthday Goodies
- Exclusive discounts
- Club e-news of events & specials
- Renewable every calendar year

### WNBS BOWLING MEMBER \$20

- Full voting rights
- Happy Hour
- Birthday Goodies
- Exclusive discounts
- Club e-news of events & specials
- Renewable every calendar year

### MEMBER NUMBER:

Note: We may reassign you a new Member Number for the reorganisation of our database.

I declare that I am over 18 years of age.  
 I agree to be bound by the Company Constitution as exists and is amended from time to time.

SIGNATURE OF APPLICANT

DATE (DD / MM / YYYY)

A receipt for this application will give the applicant named thereon the same rights as a Social Member until such time as the application has been approved at the next Meeting of the Board of Directors.

### PAYMENT

- |            |                  |
|------------|------------------|
| Cash       | Visa             |
| MasterCard | American Express |

Name (as it appears on your card): \_\_\_\_\_

Card Number (no dashes/spaces): \_\_\_\_\_

Expiry Date (mm/yyyy): \_\_\_\_\_ CCV: \_\_\_\_\_

### OFFICIAL USE ONLY

Date of Approval: \_\_\_\_\_

Member No.: \_\_\_\_\_

Card sent on: \_\_\_\_\_