



Scone Bowling Club Limited

ABN 17 001 039 854

PO Box 290
28-32 Gundy Road
Scone NSW 2337

Phone: 6545 1511
Fax: 6545 1281
Email: sbc@sconebc.com.au

Club Membership Application Form

I wish to become a member of the Scone Bowling Club Limited & by signing this application form, I agree to abide by the Constitution & By- Laws of Scone Bowling Club Limited.

Membership Fees are to be paid in full at time of application. Applications not accompanied by the proscribed fee will not be considered by the Board of Directors for election as a Member.

Please print all details

Mr / Mrs / Miss / M's _____
Given name(s) Surname

Address _____

Suburb / Town _____ Post Code _____

Date of Birth ____/____/____ **Phone Number** _____

Email address _____

My present occupation is _____

<u>Membership Categories</u>	Social - 1 year \$5.00 <input type="checkbox"/>	Social - 3 Years \$10.00 <input type="checkbox"/>
	Full Member Bowling - Male \$80.00 <input type="checkbox"/>	Full Member Bowling - Female \$80.00 <input type="checkbox"/>

Have you ever been suspended, expelled or resigned from any other club? _____

Name of club _____ Reason _____

Do you wish to receive an Annual Report each year Yes / No Post Email

Signature of Applicant _____

Office Use Only

Identification type sighted - NSW Driver's license Other _____

Authorising Officer Name _____ Signed _____

Amount of Fee paid _____ Receipt Number _____ Dated Paid ____/____/____

Membership Number allocated _____ Card printed Dated accepted ____/____/____