



OAKBANK BOWLING CLUB INC
NOMINATION FOR MEMBERSHIP

I.....
(Christian Name) (Surname)

Desire to become a Full Member Associate Member
of the Oakbank Bowling Club Inc., and if my application is accepted I hereby agree to
abide by the rules of the Club and of the relevant State and National Associations.

I am interested in playing on Wednesday Saturday Social only

I was previously a member of Bowling Club

My usual playing position was

Date of Birth

Address

..... Post Code

Telephone: Home/Business Mobile.....

Email Address

Emergency Contact Name

Emergency Contact Phone

Signature

Nominated by..... Seconded by

OFFICE USE ONLY

BowlsLink data entered?

Bowls SA Transfer completed if required?

Member provided with New Member Welcome Pack