

# Polmaise Bowling Club Membership Application Form

## Applicant Information

Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City / Postcode \_\_\_\_\_ / \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

## Membership Type

(Please Select One)

☐ Full Membership

☐ Junior Membership (Under 18)

☐ Senior Membership (Over 60)

☐ Social Membership (Non-playing)

## Emergency Contact

Full Name \_\_\_\_\_

Relationship \_\_\_\_\_

Phone Number \_\_\_\_\_

## Bowling Experience

Have you played  
before? ☐ Yes ☐ No

Experience  
Details

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**Availability and  
Participation**

Interested in:    ☐ Competitive Play  
  
                         ☐ Casual Play  
  
                         ☐ Club Social Events  
  
                         ☐ Volunteering Opportunities

**Declaration**

I hereby apply for membership of the Bowling Club. I agree to abide by the rules and regulations of the club and confirm that the information provided is accurate.

Signature

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Date

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**For Club Use  
Only**

Date Received

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Membership  
Approved

☐ Yes ☐ No

Approval

Signature

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Membership  
Number

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