



# ROBINA BOWLS CLUB INC.

*The Friendly Club*

# BOWLS MEMBERSHIP

# APPLICATION FORM

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Preferred First Name \_\_\_\_\_ Gender \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Address \_\_\_\_\_

Postcode \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile \_\_\_\_\_

Email address \_\_\_\_\_

Occupation \_\_\_\_\_

Do you give permission for your contact number to be given out via our Members Phone List: Y / N

Are you currently a Financial Member of any other Bowls Club/s as a bowls member? Y / N -

If YES - Name of other Club/s: \_\_\_\_\_

If YES - Paid up to: \_\_\_\_\_

Are you transferring to Robina as a Full Member? Y / N (This means Club Robina will be your Primary Club)

Type of Membership: Full Member – Declared for Robina or Secondary Member – Non-Declared for Robina

Have you previously played bowls? Y / N Will you require coaching? Y / N

If you have not played previously or it has been some time since you have played, we recommend you undergo a series of coaching lessons (Free coaching is provided by our coaches on Thursday morning between 10am – 12 noon)

Have you at any time been suspended, expelled, or refused admission to any bowls club? Y / N

If Yes, please give details \_\_\_\_\_

Have you played Pennant in the last two years? Y / N

Have you won any Championships? Y / N If Yes, please give details: \_\_\_\_\_

\_\_\_\_\_

Are you an accredited Coach? Y / N

Are you an accredited Umpire? Y / N

### Please provide contact details of a person in the case of an emergency:

Name \_\_\_\_\_ Contact number \_\_\_\_\_

PROPOSER SIGNATURE \_\_\_\_\_ (please print name) \_\_\_\_\_

SECONDER SIGNATURE \_\_\_\_\_ (please print name) \_\_\_\_\_

If accepted as a bowling member, I agree to comply with and be bound by the constitution, rules and by-laws of the Robina Bowls Club Inc. I understand that the membership fees are due and payable within 30 days of acceptance otherwise this application will become null and void.

APPLICANTS SIGNATURE \_\_\_\_\_ DATED \_\_\_\_/\_\_\_\_/\_\_\_\_

(Please make sure the date is entered)

This application must be registered with the Secretary/Membership Officer prior to being displayed on the notice board for 14 days.

Please place this application form in the "Bowls Secretary Box" in the Games Room – Thankyou.

## Office Use Only:

**Name of Applicant:** \_\_\_\_\_

**Member Status:** IP / Full Bowls Member (Primary / Secondary)

Notice on Club Board date \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Coaching required: started date \_\_\_\_/\_\_\_\_/\_\_\_\_

Coaching Completed date \_\_\_\_/\_\_\_\_/\_\_\_\_

Committee for approval: date \_\_\_\_/\_\_\_\_/\_\_\_\_

Approval from committee: date \_\_\_\_/\_\_\_\_/\_\_\_\_

Approval letter sent to Applicant: date \_\_\_\_/\_\_\_\_/\_\_\_\_

**TOTAL OF FEES TO BE PAID:** Yearly (JUL - JUN) \$ \_\_\_\_\_ Half-Yearly (JAN - JUN) \$ \_\_\_\_\_

Full fees paid: date \_\_\_\_/\_\_\_\_/\_\_\_\_ via Cash / EFTPOS / Direct Debit – Taken by: \_\_\_\_\_

**RECIPT DOCKET emailed:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **texted:** \_\_\_\_\_

### After Fees have been paid:

Enter Member onto the Bowlslink On-line Database: date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Bowlslink Number: # \_\_\_\_\_ Temporary Password \_\_\_\_\_

Existing Member of \_\_\_\_\_

Invite and Transfer: date \_\_\_\_/\_\_\_\_/\_\_\_\_ Transfer Approved: date \_\_\_\_/\_\_\_\_/\_\_\_\_

Enter Member onto the Members **Spreadsheet Database:** date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Enter Member onto the **Email and Phone List:** date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Membership Card printed by Club Helensvale (bar staff) date: \_\_\_\_/\_\_\_\_/\_\_\_\_

WELCOME PACK ISSUED: date \_\_\_\_/\_\_\_\_/\_\_\_\_

**ROBINA BOWLS CLUB INC.**

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