

Branksome Park Bowling Club

Application for Membership

Thank you for your interest in joining the club.

Please complete the form in **BLOCK LETTERS**

Full Name.....Date of birth.....

Address.....

.....Post Code.....

Tel No.....Mobile No.....e-mail address.....

ICE (In Case of Emergency) Contact Name Contact Tel No.....

I would like to join as a (please delete as appropriate) **as a playing member or a social (non-playing) member.**

(Please delete as appropriate) (a) I am experienced (b) I have some experience (c) I am a Novice

Name(s) of any previous Club(s).....

Name of Hon. Secretary of most recent club, if any.....

If applicable, please state your preferred playing position.....

If applicable, please give your reasons for leaving your present/previous club

.....

Please state why you wish to join Branksome Park

.....

.....

If you are well known to one or more members of Branksome Park and they are willing to recommend your membership, please name up to two of them and ask them to sign this form to that effect.

1) Name..... Signature.....

2) Name..... Signature.....

If there is anything you wish to add to support your application **please include it on the back of this form**

You may be called for an interview.

Within the limitations of the capacity of the green and pavilion the club admits playing member applicants who demonstrate that they can safely comply with the Laws of the Sport of Bowls and are assessed as being likely to be a positive influence towards the club achieving its playing and other aims and objectives. Each application is considered on its own merit, applicants being expected to show that they can deliver bowling woods safely without damaging the green and, recognising the Club's duty of care, are capable of playing a full game without ill effect.

By signing this form you agree to abide by the club rules, should your application be approved.

Signed..... Date.....

PLEASE RETURN TO:

The Membership Officer, Branksome Park Bowling Club, Leicester Road, Branksome Park, Poole, Dorset, BH13 6BZ

Form No..... Date Issued..... Date Returned.....

Interview date..... Panel Members.....