

EVESHAM BOWLING CLUB



APPLICATION FOR MEMBERSHIP – 2024

Full Name: Mr / Mrs /	/ Miss / Ms		
Address:			
			Post Code:
Telephone No:	Mc	bile No:	
E-mail Address:			<u> </u>
Date of Birth:	_//		
If you have any form o	of disability that may require	e additional suppo	ort, please let us know
NB: All members are	affiliated to the Worcestersl	nire Bowling Assoc	ciation and Bowls England
Rules and to pay th		when due. I ag	ng Club and if admitted, I agree to abide by the Cl gree to the Club holding my personal details
Арр	licants Signature:		
Date	e:		
SUBSCRIPTIONS &			
	are as follows (as at 1 st April		
Under 18's	Free	Age 20 to 25	£25
Full Time students	Free	Age 26 to 30	£30
Age under 20	£20	Over 30	£90
• •	s/spouses of members) lable to new bowlers over 3	0	£20
			team shirt (please state size required: you would like tuition from a qualified coach. Y/N
Match Fees are £3.00	per game and are paid on t	he day.	
PLEASE SEND THIS FO	RM TOGETHER WITH THE C	THE SHIRT SIZE TO	O THE CIUR SECRETARY

Mr Dave Bennett, 10 The Pool, Hampton, Evesham, WR11 2PY or by email to secretary@eveshambowls.co.uk

Your application form will be considered and in due course you will be contacted again (so please ensure that you provide all your contact details).

We prefer payment directly to our bank account, details will be provided once your application has been approved. If you cannot pay this way cheques should be made payable to Evesham Bowling Club or payment by card can be made at the club..