

provide all your contact details).

EVESHAM BOWLING CLUB



APPLICATION FOR MEMBERSHIP – 2024

Full Name: Mr / Mrs /	Miss / Ms				_
Address:					<u> </u>
			Post Co	ode:	_
Telephone No:	ephone No: Mobile No:				
E-mail Address:			_		
Date of Birth:	//				
If you have any form of	disability that may requir	e additional suppo	rt, please let ເ	us know	
	ffiliated to the Worcesters	hire Bowling Assoc	iation and Bo	wls England	
	/ Social* membership of the propriate subscription wh		_	. •	abide by the Club
Appli	cants Signature:				
Date:					
SUBSCRIPTIONS & Annual Subscriptions a	MATCH FEES re as follows (as at 1 st Apri	l 2024);			
Under 18's	Free	Age 20 to 25	£25		
Full Time students Age under 20	Free £20	Age 26 to 30 Over 30	£30 £90		
Social (free to partners A £30 discount is availa	/spouses of members) able to new bowlers over 3	30	£20		
	ou to purchase an approv lso available to purchase.			•	
Match Fees are £3.00 p	per game and are paid on t	he day.			
PLEASE SEND THIS FOR	RM TOGETHER WITH THE	CLUB SHIRT SIZE TO	THE CLUB S	ECRETARY:	
Mr Dave Bennett, 10 T	he Pool, Hampton, Evesha	m, WR11 2PY or by	email to secr	retary@eveshambo	wls.co.uk

We prefer payment directly to our bank account, details will be provided once your application has been approved.

Your application form will be considered and in due course you will be contacted again (so please ensure that you

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..