

# MEMBERSHIP APPLICATION FORM

**PENRITH BOWLING & RECREATION CLUB**

Ph: 4721 2515 Fax: 4721 8358 | [www.penrithbowling.com.au](http://www.penrithbowling.com.au)



Title.  Given names.  Surname.

Residential address.

Suburb.  State.  Postcode.

Date of Birth.  Occupation.

## TYPE OF MEMBERSHIP - SOCIAL PLEASE TICK ONE, ALL FEES ARE INCLUSIVE OF GST.

5 Years **\$15**     1 Year **\$5**

Mobile.  Phone.

Email.

## COMMUNICATION

Please keep me updated with info on Club promotions, gaming communications and the latest news and offers.

Yes     No

## ANNUAL GENERAL MEETING

It is mandatory for the Club to forward the AGM Notice to all members. I would like to receive a copy by:

Email    OR     Mail

## DECLARATIONS AND CONSENT

I, the applicant as named on this form do fully understand that I cannot be elected as a member of this Club until the Board of Directors Meeting. I also understand that if for any reason the Board of Directors refuse the application, the membership fee will be refunded in full, and the Board is not required to give any reason for non acceptance. If accepted, I hereby agree to abide by the Constitution and/or Rules and By-Laws which may be enacted from time to time by the Board. I, the person named in this application do hereby declare that I am over the age of 18 years and that my personal details are true and correct.

Your personal information will be dealt with in accordance with the Club's privacy policy. A copy of the Club's privacy policy is available on request at the Club's office. Annual Report – The Corporations Act 2001, allows the Club to provide members with their Annual Report electronically through our website rather than in printed form. This means that you will be able to view the Annual Report on our website, [www.penrithbowling.com.au](http://www.penrithbowling.com.au) each year. Members who wish to still receive the printed version of the Annual Report, please advise the Club in writing.

Signature of Applicant. \_\_\_\_\_ Date. \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Player activity statements are available on request. THINK! ABOUT YOUR CHOICES. CALL GAMBLING HELP 1800 858 858 [www.gamblinghelp.nsw.gov.au](http://www.gamblinghelp.nsw.gov.au)

## OFFICE USE ONLY

I.D. Type.  Passport     RTA ID     Drivers Licence

I.D. Number.  Membership No.  Receipt Date. \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Staff Signature \_\_\_\_\_ Receipt No. \_\_\_\_\_