

# IPPLEPEN BOWLING CLUB

## FULL MEMBERSHIP APPLICATION

Secretary: Mrs. Shirley Northwood, 10 Mayfair Road, Ipplepen,  
Newton Abbot, Devon, TQ12 5RN

Telephone : 01803 813980    Mobile: 07711 016495    Email : [shirleypat@btinternet.com](mailto:shirleypat@btinternet.com)

NAME: Mr/Mrs/Miss..... Date of Birth.... /... /.....

ADDRESS: .....

..... POST CODE.....

HOME TELEPHONE NUMBER .....

MOBILE TELEPHONE NUMBER .....

E.MAIL ADDRESS .....

NATIONALITY .....

DISABILITY .....

EMERGENCY CONTACT NAME & NUMBER .....

CAR OWNER: Yes/No

OWN SET OF WOODS: Yes/No

Are you a member of any other Bowling Club: Yes/No

If YES, please name the club(s).....

Have you previously been a member of any other Bowling Club Yes/No

If YES, please name the club(s):.....

Number of years :.....

Are you willing to play in League/Competitions home and away? Yes/No

ANNUAL MEMBERSHIP FEE : £70.00 to be paid by 1<sup>st</sup> April each year.

WINTER MEMBERSHIP FEE only : £45.00 period 1<sup>st</sup> October - 30<sup>th</sup> March

(B.A.C.S payment preferred – details available from the Secretary)

I agree to read the protocol rules of the IPPLEPEN BOWLING CLUB and abide by them.

Signed..... Date:.....

Proposed by:..... Member

Seconded by ..... Member

Please complete and return to the Secretary as above.

Data Protection Act. : I agree that my details may be circulated within the Bowling organisation.