



Standard Application for Bowls Membership

Please complete both sides of the form



I the undersigned, hereby apply for membership of the below mentioned Bowling Club and, if accepted, undertake to abide by the constitution, rules and regulations of said Bowling Club, and of the Association to which it is affiliated.

1 CLUB DETAILS

Club	District
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2 APPLICANT'S DETAILS

Title	Full Name		
I.D. No.	Occupation		
Postal Address	Tel No. (H)		
	(W)		
	Code		
	(C)		
Fax No.	E-mail		

3 TO BE COMPLETED BY APPLICANT

Have you ever been a member of a Bowls Club? YES NO

If YES, state your current BOWLS SOUTH AFRICA Membership No.

If YES, Names of Club(s)	1.
	2.
Names of Club(s) of which you are currently a member	1.
	2.

If this application is part of a Dual/Multi Membership please state which club will be your:

Primary	Secondary
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Are you a Registered Umpire?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Badge No.
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Are you a Registered Coach?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Badge No.
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Are you a Registered Greenkeeper?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Badge No.
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Club Grading	<input type="checkbox"/> SKIP <input type="checkbox"/> 3RD <input type="checkbox"/> 2ND <input type="checkbox"/> LEAD	Level played
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Have you ever been (a) Suspended by, (b) Requested to resign from, or (c) Expelled from any Club? YES NO

If YES, state name of Club

Have you served on any Bowls Committees? YES NO

Which ones? (BSA, District, Club, Umpire, Coaches etc.)	1.
	2.
	3.



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4 COMMUNICATIONS

Preferred method of general communication (mark all that apply)	<input type="checkbox"/>	E-mail	<input type="checkbox"/>	SMS
May we use your cell number for Club, District and BSA communications?	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
May we put you on our bulk-emailing list?	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO

5 CLEARANCE CERTIFICATE

- a) No member of a club within Bowls South Africa shall be allowed to join another registered Club, as their PRIMARY CLUB, unless he/she produces a Clearance Certificate from his/her previous club of which he/she may still be a member.
- b) The duly completed Clearance Certificate must be attached to this form.
- c) The application for membership may not be completed unless the requirements of (a) and (b) hereof have been completed.

Date	Signature of Applicant
BSA Database Clearance Code	



FOR OFFICIAL USE

Name to be printed on Tab	Tab No.
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TRANSFERRING BOWLER

We the undersigned, hereby confirm that all details provided on this application, by the applicant to be correct.

Proposer	BSA No.	Signature
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Secunder	BSA No.	Signature
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FIRST TIME BOWLER

I hereby confirm that the applicant has been introduced to the Sport of Bowls for the first time and is not a transfer from another club. Therefore I claim relief from BSA Fees for the year as indicated:

Proposer	BSA No.	Signature
	Year:	

Club President	BSA No.	Signature
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Club Secretary/Treasurer	BSA No.	Signature
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Date of Acceptance of Membership
