

**BOWLS SOUTH AFRICA PLAYER PROFILE**

SURNAME: \_\_\_\_\_

NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

BIRTHPLACE: \_\_\_\_\_

I.D. NUMBER: \_\_\_\_\_

MEMBERSHIP NO: \_\_\_\_\_

SOUTH AFRICAN PASSPORT HOLDER: YES / NO

PASSPORT NO: \_\_\_\_\_

POSTAL ADDRESS: \_\_\_\_\_

\_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

TEL: (B) \_\_\_\_\_

TEL: (H) \_\_\_\_\_

CELL: \_\_\_\_\_

FAX: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

MARRIED: YES / NO

CHILDREN: YES / NO

HOBBIES: \_\_\_\_\_

DISTRICT: \_\_\_\_\_

CLUB: \_\_\_\_\_

RIGHT/LEFT HANDED: \_\_\_\_\_

AGE FIRST PLAYED COMPETITIVELY: \_\_\_\_\_

GOAL IN BOWLS: \_\_\_\_\_

PLEASE LIST YOUR TOP ACHIEVEMENTS OF THE PAST FEW YEARS (2005-2008):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DO HAVE ANY MEDICAL CONDITIONS: YES / NO

IF SO, PLEASE LIST: \_\_\_\_\_

PLEASE INDICATE IF YOU HAVE ANY DIETARY REQUIREMENTS: \_\_\_\_\_

\_\_\_\_\_

DO YOU REQUIRE AIR TRAVEL? YES / NO

CLOSEST MAJOR AIRPORT FROM WHERE YOU WILL TO TRAVEL: \_\_\_\_\_