



The Royal Tunbridge Wells District Indoor Bowls Club Limited

PLAYING MEMBERSHIP APPLICATION

I hereby apply for Playing Membership of The Royal Tunbridge Wells District Indoor Bowls Club Ltd. I understand that this application for membership does not guarantee acceptance.

The Royal Tunbridge Wells District Indoor Bowls Club Ltd., High Woods Lane, Tunbridge Wells, Kent TN2 4TU

Title (Mr., Mrs., Other) Initials

First Name Surname

Address

.....

.....

..... Postcode

Telephone (including code)

Date of Birth: If 14–21 years (Junior Membership)

It would be useful if you could tick one of the following boxes to give an indication of your age:

Under 25 25–35 36–45 46–55 56–65 66–75 Over 75

Are you registered disabled? No Yes **Are you wheelchair bound?** No Yes

Outdoor Bowling Club if any

Do you already belong to an Indoor Club? No Yes If so, please indicate the name of the Club:

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Applicants are advised that the Memorandum of Association, Articles of Association, Byelaws and Regulations of The Royal Tunbridge Wells District Indoor Bowls Club Limited are available on request at the Green Steward's Desk.

I agree, should my application be accepted, to conform to the Byelaws and Regulation of the Club.

Signature of applicant **Date**

Proposed by:

Signature Print Name

Membership No.

Seconded by:

Signature Print Name

Membership No.

Note: the Council of Management will consider your application following an interval of at least 7 days after the receipt of your fully completed application for membership. If approved your membership will start from receipt of your annual fees and the issue of your Membership Card.

Official use only

Accepted by CoM 3 Directors

Date of acceptance Date of notification Date of receipt of fees

Membership No. allocated Date card and acceptance sent