

The Malvern Bowling Club

THE MALVERN BOWLING CLUB 14 Coonil Crescent Malvern Victoria 3144 ABN 95 167 343 497

Web: <u>www.malvernbowls.com.au</u> Email: <u>info@malvernbowls.com.au</u>

Application for Membership 2025-26

Surname:	Given names:		
Email address: (please print cle	early)		
Mobile:			
Date of birth:	Previous oc	cupation:	
Address:			
		Postcode:	
Emergency	Contact number:		
I wish to apply for membership as (pl	lease tick box):		
Full Club Member	\$320	Please tick box if wishing to include a refundable \$60.00 deposit for a key to the front gate and club rooms for out of hours access.	
Basic Level Club Member	\$165		
Non-bowling Club Member	\$88		
U18/Student member	\$25		
Bowling experience (please circle):	Yes / No	Transfer required:	Yes / No
If applicable - membership at last bo	wls club:		
I am willing to volunteer in the followi	ng categories (ple	ease tick box):	
Website development/ maintenance	Fund raising	Functions support	Wednesday dinners
Bookkeeping	Bar duties	Minor building maintenance	Garden maintenance
Iif admitted, agree to support the p those of the governing body for bo	urposes of the c	lub and comply with the Rule	-
Signature of Applicant:		Date:	
Office use: Date Invoiced:		Date entered BV database:	