IPPLEPEN BOWLING CLUB WINTER MEMBERSHIP APPLICATION

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

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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 :..... WINTER MEMBERSHIP FEE only : £40.00 period 1st October - 30th March After acceptance of application payment can be made by cash, or cheque made payable to Ipplepen Bowling Club or B.A.C.S payment (preferred) - details of which can be obtained from the Secretary. Winter members will be added to the Clubhouse cleaning rota, and should expect to have one session (in a group with others) during their six month membership. I agree to read the protocol rules of the IPPLEPEN BOWLING CLUB and abide by them. Signed...... Date:..... Proposed by:..... Member

Please complete and return to the Secretary as above.

Seconded by Member