



## CAMBRIDGE BOWLING & RECREATION CLUB (INC.)

ABN 85 968 704 021

Chandler Avenue West, Floreat WA 6014

PO Box 80 Floreat WA 6014

Phone: 08 9387 3018

### Membership Application

Surname: \_\_\_\_\_ Given Names: \_\_\_\_\_

Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Occupation: \_\_\_\_\_

Business Address: \_\_\_\_\_

Contact No: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email Address: \_\_\_\_\_

I \_\_\_\_\_ hereby apply for membership to the Cambridge Bowling and Recreation Club (Inc.) and I intend joining as noted below.

On acceptance of membership of the Club, I agree to be bound by the Constitution and Regulations or By-Laws and the Code of Conduct that may be properly issued by the Management Committee acting under and within the scope of the Constitution of the Club.

Have you previously been or are at present a Member of any other Club? \_\_\_\_\_

If so, state club: \_\_\_\_\_

Date: \_\_\_\_\_ Applicant (Sign): \_\_\_\_\_

Proposed (Print name and sign): \_\_\_\_\_

Seconded by (Print name and sign): \_\_\_\_\_

FEE STRUCTURE		
MEMBERSHIP TYPE	ANNUAL SUBSCRIPTION	TICK AS APPROPRIATE
Social Bowling Member	\$200	
New Full Member ( 1 <sup>st</sup> year only)	\$158	
Dual Member	\$85	
Junior/Student Member	\$30	
Social Member	\$25	