MEMBERSHIP APPLICATION FORM

The Secretary,
Kilmore Bowls Club Inc.
PO Box 54,
Kilmore. 3764.

I ……(Full Name). D.O.B: / / .

Address: …….

Telephone No: …….Mob: ……..E-Mail: …….

Desire to become a

Full Member ☐ Transitional Member ☐ Junior Member ☐ Social Member ☐

Bowling Experience:
I have never bowled before ☐ I have bowled before ☐ I have played pennant bowls ☐

Privacy Statement:
I agree to support the purposes of the Kilmore Bowls Club and comply with its rules. I understand that the information I have provided in this membership application is necessary for the conduct and management of KilnmoreB C, and for the administration of bowls in Victoria in general. Also, that Kilmore B C and Bowls Victoria may use or disclose my personal information for the purposes of providing me with member services, or promotional material, or otherwise in accordance with their privacy policies. I agree that Kilmore B C and Bowls Victoria may share my information with third parties such as affiliates and other organisations involved in bowls in Victoria. e.g. Companies engaged by Kilmore B C and / or Bowls Victoria professional advisors, including accountants, auditors, lawyers and insurers. However, I acknowledge that my information is not generally disclosed to anyone outside Australia. I understand that the Kilmore B C and Bowls Victoria privacy policies contain how I may access and request correction of my personal information held by the Kilmore B C, or Bowls Victoria, or make a complaint about the handling of my personal information, and provides information about how a complaint will be dealt with by Kilmore B C, or Bowls Victoria. I acknowledge that my membership application may be rejected if the information required is not provided. If I do not wish to receive promotional material from Club sponsors, or Bowls Victoria, or third parties, I must advise the Club, or Bowls Victoria in writing, or via the opt out procedures provided in the relevant communication.

☐ I do not wish to receive promotional material from the sponsors of the Club and / or Bowls Victoria, or third parties.

Signature:……. / / .
(Parent or Guardian for Junior): ……. / / .

NOMINATION:
We being full members of Kilmore Bowls Club nominate and second the application of the above applicant.

Proposer (print name): …….. Signature: …….

Seconder (print name): ……. Signature: …….

COMMITTEE ACCEPTANCE: Yes ☐ No ☐ / / .

Letter of acceptance / non acceptance forwarded to applicant on / / .