

**NORTH TOOWOOMBA BOWLS CLUB INC.  
SOCIAL MEMBERSHIP APPLICATION**

**Fee $5 for 5 years**

I hereby make application to be admitted as a **SOCIAL MEMBER** of the North Toowoomba Bowls Club Inc. and I declare I am over the age of Eighteen (18) and legally entitled to apply for membership of a licensed Club. I have been advised that the club has a $10 million public liability insurance policy.

If elected to membership, I agree to comply with all rules, by-laws and government regulations which govern the conduct of the Club.

NAME

ADDRESS

Post Code

SIGNATURE

PROOF of IDENTITY eg Drivers Licence, Proof of Age Card

MOBILE PHONE

EMAIL ADDRESS

**Nomination Details**

Nominated By (Member’s Name)

Seconded By (Member’s Name)

Membership Number

Office use only

Date Received

Date of meeting at which nomination presented

Passed Fees Paid Yes/No Receipt Number