



# Fawkner Bowling Club INC.

## Nomination form for membership

Name of applicant:

Address:

Suburb:

Postcode:

Occupation:

Phone no:

Date of Birth:

Mobile no:

Are you a past or present member of a bowling club? Yes/No

If yes, which club

Division

Position

Are you available to play pennant bowls?

Yes/No

Signature of applicant

Date:

## Nominator to Complete

Print name of Nominator:

Address:

Signature of Nominator

Date:

## Secunder to Complete

Print name of Secunder:

Address:

Signature of Secunder:

Date:

## Committee

Nomination -

Accepted/Rejected

Signature of Chairperson

Date: