

# OURIMBAH LISAROW R S L BOWLING CLUB

ABN89378026393

## APPLICATION FOR MEMBERSHIP

FULL NAME \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Post Code \_\_\_\_\_ Phone Number \_\_\_\_\_ Mobile \_\_\_\_\_

Email address (please print)

Occupation \_\_\_\_\_ If retired, Past Occupation \_\_\_\_\_

Member of OLRSL Club Ltd \_\_\_\_\_ Number \_\_\_\_\_

Member of another Bowling Club \_\_\_\_\_ Royal No \_\_\_\_\_

Name of that club \_\_\_\_\_ Played Bowls Before \_\_\_\_\_

If Played before, usually what position \_\_\_\_\_

Signature of applicant \_\_\_\_\_

Committee acceptance \_\_\_\_\_ Date \_\_\_\_\_

All persons are warned that participation in Lawn Bowls and any other recreational activities may involve the risk of personal injury caused by either falls or physical exertion.

It is a condition of entry to these premises and greens that any person who engages in lawn bowls and other recreational activities agrees to do so entirely at his or her own risk.

BY ORDER OF THE MEMBERS OF THE BOWLING COMMITTEE.  
T. PEARCE—SECRETARY DATED July 25th 2011

I ACKNOWLEDGE that I have read and accept these conditions

Full Name \_\_\_\_\_ Signature \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

FULL FEES (SEE SECRETARY) MUST ACCOMPANY THIS APPLICATION.  
**PLEASE NOTE THAT** THE APPLICANT WILL BE DEEMED TO BE A MEMBER UNLESS HE RECEIVES A NOTIFICATION THAT HIS APPLICATION IS UNSUCCESSFUL.

Amount Paid

Rct No