

# Manning Memorial Bowling Club Inc.

Challenger Avenue Manning WA 6152  
Phone 9450 4998 (Office), 9450 3410 (Bar); Fax 9450 6614  
Email: manningeagles@bigpond.com

## Social Membership Nomination Form

**Only FULL members can propose a new member in any category.**

Name: \_\_\_\_\_

Address \_\_\_\_\_ PC \_\_\_\_\_

Phone / Mobile \_\_\_\_\_

E-mail \_\_\_\_\_

In accordance with the Constitution of the Manning Memorial Bowling Club Inc., I apply for election in the following category of membership

Social Member

Dance Member

Jack Attack

Manning Rippers

Membership Renewal

Signed \_\_\_\_\_ Date \_\_\_\_\_

Fee to be paid at the bar.

Please note: Membership is until 30 June each year.

It is the individual's responsibility to renew their membership in July of each year.

Proposed by \_\_\_\_\_ Signature \_\_\_\_\_ Club No \_\_\_\_\_  
Please print name

Seconded by \_\_\_\_\_ Signature \_\_\_\_\_ Club No \_\_\_\_\_  
Please print name

**Bar Staff use only:**      \$10 Fee.

Till receipt to individual & copy retained in till-drawer. Signature of person taking money \_\_\_\_\_

Completed form placed on secretary's desk.