

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 _____ (please print clearly)

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

Signed _____ Date _____

In accordance with the Club's Privacy Policy, this information will not be provided for any form of commercial gain and will be maintained in a secure location electronically.

How did you hear about our club: (please tick relevant box / boxes)

Friends / family

Club's Facebook or other social media

Drive or walk past each day

"**Gotta Love The Bowlo**" advertisement

Looking to hire facilities

Other: _____

Proposed by _____ Signature _____ Club No _____
Please print name

Seconded by _____ Signature _____ Club No _____
Please print name

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.

Bar Staff use only: \$10 Fee. Till receipt to individual & copy retained in till-drawer.

1. Name of individual written on back of till receipt.

2. Membership card created and given to person.

3. Completed form placed on secretary's desk.

4. Member details added to card by secretary

Card number issued _____ (insert)

Signature of person taking money _____