HOLDFAST BAY BOWLS AND CROQUET CLUB INC. MEMBERSHIP INFORMATION FORM

FULL NAME					MALE / FEMALE			
ADDRESSP/CODE								
TELEPHONE HOMEWORKMOBILEMOBILE								
EMAIL: PARTNERS NAME								
Have you changed your details since last year?					Yes / No			
Do you intend to play Pennant Bowls or Pennant Croquet this season? Yes /No								
Tick Memb	bership Category	Full	Associate	Social	Junior	Indoor	Country	
MEN'S BO	WLS							
LADIES BO	WLS							
CROQUET								
EMERGENCY CONTACT & NEXT OF KIN DETAILS -THIS INFORMATION IS ESSENTIAL FOR OUR FILES								
NAME TELEPHONE					MOBILE			
BOWLS - P	PENNANT REGIST	TRATION						
Will you be available to play Pennants and be prepared to play where selected? YES / NO								
What is your preferred playing position?								
WEDNESDAY (MEN)			YES / NO	SATURDAY (O	PEN)	YES / NO		
THURSDA	Y - (WOMEN)		YES / NO					
BOWLS ORGANISED SOCIAL GAMES-Would you like to play Social Winter Bowls? Yes/No								
CROQUET SOCIAL GAMES (All Year)-Would you like to play Social Croquet? YES / NO								
CROQUET PENNANT GAMES-Would you like to play Croquet {Pennant games?						YES/NO		
OUR CLUB RELIES ON ITS VOLUNTEERS, SO IF YOU CAN HELP IN ANY CAPACITY, PLEASE MARK YOUR PREFER								
TOURNAM	1ENT			MAINTENANC	E			
FUND RAISING			CLEANING ROSTER					
SOCIAL FUNCTIONS				SOCIAL BOWLS				
HOUSE / BAR			OFFICE/COMPUTER					
GARDEN				NIGHT OWLS ROSTER				
TWILIGHT	BOWLS			BBQ FUNDRAI	SING			
Please indicate your profession, trade or special skills								
SIGNATURE DATE								
This form must be returned to the Club c/- 583 Anzac Highway, Glenelg North, S.A. 5045 by 15th August, 2022								
OR	By email > secretary@clubholdfast.com.au<							