

APPLICATION FOR MEMBERSHIP

I, _____ (Title) _____ (Christian Names)

_____ (Surname)

hereby apply for **FULL/WEEKDAY/STUDENT/JUNIOR/NON-PRIME** membership
of the **BOWLS / SQUASH / TENNIS / SOCIAL** sub-club

I.D. number _____ Date of Birth _____

Postal Address _____ Telephone numbers _____

_____ Home _____

_____ Work _____

Postal Code _____ Cell _____

E-Mail Address _____

I am/was a member of _____ Club, Clearance Certificate attached YES/NO
Level Played _____

Where did you hear about our Club : _____

I am known to the following members :

Proposer _____ Signature _____

Secunder _____ Signature _____

I understand that subscriptions are payable annually in advance and that no refunds are made for termination of membership before the end of a financial year. I undertake to give the Secretary written notice should I decide to resign from the Club. I agree to accept the constituion of the Club (including the rules of the sub-clubs) and to abide by all decisions of the Club Committee.

Signature _____ Date _____

Entrance Fee _____ Subscription _____ For the period _____ to _____

ABSA SANDTON 632-005, ACC NO. 4045043588, INO-BRYANSTON SPORTS CLUB