



HEXHAM ELVASTON BOWLING CLUB

MEMBERSHIP APPLICATION FORM

Personal Information

Full name: _____

Date of Birth: _____

Age: _____

Address: _____

Town: _____

Post Code: _____

Phone Number: _____

Email Address: _____

(If under 18, Parent/Guardian information is required below)

Name of Parent/Guardian: _____

Membership Details

• **Bowling Experience:**

Beginner

Experienced - Previous Club: _____

• **Membership Type (Select one):**

Full Membership (including carpet bowls) (£150, £75 for first year for those new to bowling)

Junior Membership (FREE for 18 years or under)

Social Membership (£10)

Carpet bowls (ONLY) Membership (£15)

• **Other:**

Clubhouse door and locker key (£10.00 returnable deposit which will be added to the membership fee payable)

Emergency Contact

Name: _____

Relationship: _____

Phone Number: _____

Terms and Conditions

- I agree to abide by the rules and regulations of the Bowling Club.
 Yes, I agree
- I understand that the Bowling Club reserves the right to terminate membership for non-compliance with club rules or conduct that negatively impacts the club's reputation.
 Yes, I understand

Privacy Policy

Your privacy is important to us. The Bowling Club collects personal information to process your membership and provide you with the best experience possible.

By checking the boxes below, you consent to the following:

- I consent to the collection of my personal data for membership purposes.
 Yes, I consent
- I consent to the use of my contact details for club-related communications, including newsletters, event updates, and promotions.
 Yes, I consent No, I do not consent
- I understand that my personal data will not be shared with third parties without my prior consent, except as required by law.
 Yes, I understand
- I consent to the use of photographs or recording of my participation in club events for promotional and marketing purposes.
 Yes, I consent No, I do not consent

Payment Information

- Membership Fee: £ _____
- Payment Method:
 Bank Transfer (Sort code: 30-94-19 Account: 00222415)
 Cheque/Cash

Signature

By signing below, you confirm that all information provided is accurate and that you agree to the terms outlined above. Signature should be from parent/guardian if member is under the age of 18).

Signature: _____ Date: _____

Please complete and post to our secretary: Phil Hood, Littlegarth, Elvaston Road, Hexham, NE46 2HH or scan and email it to; secretary@elvastonbowls.co.uk