**WATCHET BOWLING CLUB**



**MEMBERSHIP RENEWAL APPLICATION 2025 – 2026**

**The membership year is from 1st April to 31st March.**

**Payment to be made no later than 1st April 2025**

**PLEASE PRINT CLEARLY**

|  |  |  |  |
| --- | --- | --- | --- |
| FULL NAME |  | | |
| ADDRESS |  | | |
| Telephone Number: |  | | |
| Email |  | | |
| Year of Birth |  | | |
| Gender |  | | |
| Ethnicity |  | | |
| **MEMBERSHIP TYPE** | | **FEES** | **Please tick** |
| Full Membership (outdoor & indoor) | | £100.00 |  |
| Apprentice/Student (outdoor & indoor) | | £50.00 |  |
| Junior (Under 18) (outdoor & indoor) | | £13.25 |  |
| Outdoor only | | £81.00 |  |
| Indoor only | | £24.25 |  |
| Social | | £12.00 |  |
| Paid By: (delete as appropriate) Bank Transfer / Cheque / Cash / Card (Bar)  ***Full and Social memberships (only) can be paid over the bar by card*** | | | |

*Payment via bank transfer to:* Watchet Bowling Club Building Fund

*Lloyds Bank: Sort Code:* 30-62-63 *: A/C No:* 16651068 *Ref:* your name

Watchet Bowling Club will hold this information both in hard copy and electronically to ensure the efficient management of the Club. You will be, from time to time, contacted by email in relation to the Club, Games, Social Events, Important Notices and Announcements. Your email may also be used for communication relating to other Club matters. Please indicate if you do not want your email used for these purposes. The information will be reviewed annually. **All members are to complete this form to ensure we have the correct information. Any changes during the season must be notified to the membership secretary.**

Your name and telephone number(s) will be entered into Bowlr which will be available for other members in order to arrange games. Please indicate if you do not want this information to be held publicly (the Club Captains/Vice Captains, membership secretary and communications will hold this information)

Please note from time to time we may have to provide information to any of the three National Governing Bodies for Bowls and they may request your contact details.

SIGNATURE OF APPLICANT ……………………………................. Date ……………......….

Please return your completed form to Jackie Hutchings, Membership Secretary, Watchet Bowling Club, Culvercliffe Road, Watchet TA23 0EN. There is a Membership post box in the indoor viewing room, just by the door. Or by email to: [wbcmembership783@gmail.com](mailto:wbcmembership783@gmail.com).

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| The Club is run by volunteers, and so all members are expected to help from time to time : *please tick to indicate how you can help.*  *Cleaning ( ) Maintenance ( ) Bowls Teas ( ), Green-keeping ( ) Gardening ( ) Bar ( )* |

Please turn over and fill out the medical form

MEDICAL FORM

Please note that this form will be held securely in a locked cabinet with the key made available to a designated official for the day for use in case of medical emergency

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| --- |
| Emergency Contacts (Name & Phone number)  1.  2. |
| Do you have any health conditions (please list below) |
| Do you take any medications (prescription or non prescription)? Please list below |
| Do you have any allergies? (please list below) |
| Do you have a pacemaker fitted or any other device that the Emergency Services may need to know about? |
| Are there any other issues that the Club should be aware of in case of emergency? |