



CHATSWORTH BOWLING CLUB

APPLICATION FOR MEMBERSHIP

Name

Address:

Telephone Number- Landline:

Mobile:

E-mail address:

Signature:

Date:

Proposed by: (we can arrange for this section to be completed for you if necessary)

Name:

Signature:

Seconded by:

Name:

Signature:

Both the Proposer and Seconder must be Ordinary Members of Chatsworth Bowling Club.

Proposed new member:

(please circle)

Are you a Chatsworth Estate employee or tenant?

Yes / No

A member of another Chatsworth Estate sports club?

Yes / No

If yes, which club?

Health / Golf / Swimming / Cricket / Fishing / Tennis

A member of another bowling club?

Yes / No

Please return this completed form to the Club Secretary:

John Spon-Smith
5 Mill Farm Close
Calver,
Hope Valley
S32 3WW

Tel: 07778 555393

Email: chatsworthbowls@gmail.com

Committee:

Presented.....Decision.....Informed.....Date.....