



Membership Application Form

Club House: Oxford WMC & MSA, 160 High Street, Oxford 7430. Telephone 03-312-3353.

Website: www.oxfordclubbowls.co.nz

Postal Address:

Mr G Evans, 3587 South Eyre Road, Oxford 7495.
Tel 03-312-4645. Email: grant.judy.evans@xtra.co.nz

I, hereby apply for membership of Oxford Club Bowls:

Please Tick Membership Type: Full Member [] or Social Member []

First Name		Email
Surname		Phone
Postal Address		Mobile
		Shirt Size
Occupation		Date of birth

Player Profile: Please tick as applicable:

- [] I am a new bowler
- [] I have bowled before and do not belong to any other bowling club
- [] I am a current member of thebowling club
- [] I started bowling in the year

If you have bowled before what position do you normally play:.....

DISCLOSURE UNDER THE PRIVACY ACT 1993

1. Personal details such as member's names, addresses and telephone numbers will be included on membership lists which may be displayed at the club house and /or circulated to other club members.
2. As a condition of its affiliation to Bowls New Zealand, the club is required each year to forward details of the name, address, telephone number (if relevant) and office held (if relevant) of all members to the Centre for one or more of the following purposes:
 - (a) To be kept as part of the Centre records including levy purposes.
 - (b) For publication and distribution in the Centre Handbook (if necessary).
 - (c) To enable the Centre to disclose the information to potential sponsors (if necessary) for the purposes of obtaining Centre sponsorship.
 - (d) To enable the Centre to forward the information to Bowls New Zealand in accordance with the requirements of the constitution of Bowls New Zealand for the associations own records and for disclosure to potential sponsors (if necessary) for the purposes of obtaining sponsorship for Bowls New Zealand.

Signed: Date

Accepted: Date