

WEST COAST BRIDGE CLUB (INC) FULL AND ASSOCIATE MEMBERSHIP APPLICATION

Title	Surname			Given Name			Summer	sili
Addres	ss							
				Ро	stcode	Phone		
Email a	address							
Day	Month	of you	ır birth (red	uired by AB	F for identity o	check).		
Emerg	ency Contac	t: Name				Phone		
Signat	ure of appli	cant				Date		
Propos	er		Sec	onder		D	ate	
Signati	ıre	***************************************	Sigr	ature		D	ate	
	hand this c		together v	vith a \$20 no	on-refundable	application fe	e to a club director	ora
	would like t ate member		adge pleas	e indicate y	our preferred	name below. C	ost of badge to	
ratifica On app is due f	oplication w tion to the r proval you w for renewal	next meeting of rill be required t	the club's the Manag to pay an ar for people j	notice board ement Com	mittee. iption fee of \$	60, (Associate i	be presented for membership \$30) w an initial <i>pro rata</i> f	vhich ee of
Please	complete ti					inc.		
Are you	ı currently a	member of an	other bridg	e club?		Yes /N	lo (circle response)
Have y	ou ever bee	n a member of	another bri	dge club?		Yes/N	o (circle response)
If yes, v	which club?				Your ABF nu	ımber		
Do you	wish to reg	ister West Coas	t Bridge Clu	ıb as your *I	home club?	Yes/N	o (circle response))
(*home	club is you	r nominated Af	BF club) I	yes, please	complete the	transfer autho	rity below.	
			TR	ANSFER A	UTHORITY			
l wish t	o register W	est Coast Bridg	e Club as m	y Home Clu	b			
Signed.	•••••			Date				
Office use on	ly .							
Director / (committee member	Membership Secretary	Notice Board	Committee Meeting	Membership Secretary	to finalize Paid		