Cambridge Park Bowling & Sports Club Ltd Cambridge Park, East Twickenham, TW1 2PG

Tel: 020 8892 0181

Email: cambridge\_park@btconnect.com



## MEMBERSHIP APPLICATION CAMBRIDGE PARK BOWLING & SPORTS CLUB 01 MAY 2023 - 30 APRIL 2024

As a member of the Community Amateur Sports Club (CASC), membership of Cambridge Park Bowls & Sports Club Ltd is open to all persons irrespective of their ethnicity, nationality, sexual orientation, religion or beliefs, age, sex, or disability, except in relation to any requirements of bowling as a particular sport.

Application for membership must be in writing on this form and submitted to the Club at the address above.

The Club may refuse an application of expel a member only for good and sufficient cause, such as conduct or character likely to bring the Club or the sport into disrepute. An appeals process applies.

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I wish to apply for membership of Cambridge Park Bowling & Sports Club and in doing so agree to abide by the Constitution and Rules of the Club and agree to follow all Covid Guidelines as published by the Club.

Please indicate the type of membership for which you are applying:-

•	Full Club membership of both Indoor and Outdoor Sections	£230
•	Indoor Section only	£ 130
•	Outdoor Section only	£ 165
•	Junior Membership	£ 25
•	Social Membership	£ 10
	For Social Memberships, car parking is only available whilst attending	
	Events at the Club	

Payment can be made by BACS Transfer, Debit or Credit Card, Membership Card or Cheque. If you have received an invoice, please use the reference number especially if you are paying by online banking PLEASE COMPLETE A NEW MEMBERSHIP FORM ONLY IF YOUDETAILS HAVE CHANGED. IF YOU WISH TO CHANGE YOUR MEMBERSHIP STATUS, PLEASE LET ANGE CUMINE KNOW ASAP. TELEPHONE: 07973 654 877.

Please complete the requested details below in BLOCK CAPITAL LETTERS and sign where indicated.

NAME	
ADDRESS	
POSTCODE	
EMAIL	
TELEPHONE (Preferred No.)	
DATE OF BIRTH	
GENDER	
CAR including Make, Colour &	
Registration No.	
LOCKER NUMBER	
EMERGENCY CONTACT NO.	
MEDICAL CONDITION	
(In case of emergency only)	
DISABILITY	
ETHNICITY	
ANY OTHER HELPFUL	
INFORMATION	
IN ORMATION	
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I consent to the personal data contained in this Membership Application and Renewal document to be used in the administration of matters relating to the Cambridge Park Bowling & Sports Club Ltd. I understand that these details will be managed in accordance with the Club's Data Protection Policy and that the information will not be divulged to third parties except as described in the policy.

In relation to the above, I agree to my contact details being provided to other Club members for the purpose of leagues, matches or competitions.

I further consent to receiving occasional emails and correspondence relating to Cambridge Park Bowling & Sports Club Ltd and the various associations to which the Club is affiliated.

SIGNED	
PLEASE PRINT NAME	
DATE	