

**LOSTWITHIEL BOWLING CLUB**  
**APPLICATION FOR PLAYING MEMBERSHIP**

Surname	
Forenames	
Address	
Postcode	
Home Phone Number	
Mobile Phone Number	
E:mail address	
Date of Birth	
Occupation	

I wish to apply for membership of Lostwithiel Bowling Club. I agree to pay the annual subscription which shall be fixed according to club rules. I agree to abide by all the rules of the club.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Please return completed form and a cheque made payable to "Lostwithiel Bowling Club" for the sum of £55 to:

Mrs. J. Lean

Secretary, Lostwithiel Bowling Club,

Broadwood House,

The Moors,

Lostwithiel,

Cornwall PL22 0BX