

New Westminster Lawn Bowling Club 710 8th Street, New Westminster, BC V3M 3S2 **APPLICATION FOR MEMBERSHIP - 2024**

Please complete a separate form for each household member.							
Membership Card		Locker #					
Last Name:		First Name:					
Address:							
City: Postal Code							
Telephone:Member Since (Year)							
Emergency Contac	ct:						
Relationship:	elationship: Phone:						
Email Address:							
Are you able to print emails or electronic messages? (please circle) YES NO							
NWLBC MEMBERSHIP (Please circle the category that applies to you)							
Full Member							
New to Lawn Bowling Member							
Associate (Must be a full member of another Bowls Canada club)							
Other Clubs: If you belong to more than one club, please designate your HOME club:							
	, , ,		,,	<i>3</i> ,			
							
Age Category – Age range is a requirement of Bowls BC and Bowls Canada (please circle)							
	6-12	13-17	18-25	26-54	55+		
I AM WILLING TO SERVE AS A CLUB VOLUNTEER in the following area(s). Please circle at least one:							
Kitchen/Social	Games	Buildings	Coaching	Greens & G	rounds Tou	urname	ent Convener
The following request for your consent is a requirement of the Personal Information Protection Act of British							
Columbia. (Please Circle YES or NO). I CONSENT TO:							
The publication of my name and telephone number in NWLBC Membership Directory. YES NO							
The publication of my email address in NWLBC Membership Directory							
The use of my email address by the President or Executive Committee for NWLBC group and Bowls BC information updates and notices							
NWLBC group	and Bowls B	c information	updates and not	ices	•••••	YES	NU
Signature						Date	