



## SOUTHWICK BOWLING CLUB

Affiliated to B.E. S.C.B.A. S.C.W.B.A. B.H.D.L

### Membership application form

To Hon. Secretary.

We the undersigned nominate the following candidate for membership.

Name:

Address:

Contact No.:

Proposed by:

Seconded by:

Signature of candidate: \_\_\_\_\_