



Registration Form for BCGBA Membership



County Association:	DERBYSHIRE CGBA	County Membership Number:	BCG	10006	CA
Club Name:		Club Membership Number:	DER		CL

Number ~	Mr/ Mrs/Miss /Ms	First Name	Name 2	Surname	Gender M/F	Date of Birth

~ Applications for a Replacement Card only

Address	Post Code	Email	Tel: Landline	Tel: Mobile

Ethnic Origin *	Disability or Serious Illness *

* Please see notes for further information on these two boxes

Card to be returned to:

Club Secretary
Applicant

<input type="checkbox"/>	Please tick your
<input type="checkbox"/>	preferred option

I enclose a cheque to the value of £

(£10 for a new player, £3 for a replacement card)

Cheque to be made payable to: DERBYSHIRE C.G.B.A.
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IAN WALLIS
Address: BURTON BOWLS CENTRE, HAWKINS LANE, BURTON on TRENT, STAFFORDSHIRE, DE14 1QH
Phone: 07934-896742 OR 01283-515855 E-mail: burtonbowls@btconnect.com

electronic payment not available at present .

Please note: The information given on this membership registration form will only be used in connection with your BCGBA Membership and will not be shared with any other organisation.