

# THE GRIFFIN BOWLS CLUB

Affiliated: BOWLS ENGLAND, E.B.A., E.C.B.A., E.C.W.B.A.

Clubmark accredited February 2019 Disability Mark accredited March 2020

## APPLICATION FOR MEMBERSHIP - 2024

Surname.....First name.....D.O.B.....  
Address.....  
.....Post Code.....Home phone.....  
Email.....Mobile.....  
(Please leave an email address ONLY if you use your email regularly. Information will be sent regularly by email.)  
Would you prefer an alternative method of communication/ Yes/No If yes, please clarify.....  
Emergency contact phone number..... Are you registered disabled. YES / NO  
Is there any important medical information which the club should be aware of? e.g. Diabetes, epilepsy, asthma.  
.....

### Health and/or Medical Condition/s:

Are any of the health issues below relevant to you? (Please tick all that apply):

- 1) **Visual** (e.g. blindness or partial sight) ☐      2) **Mobility issues** (e.g. difficulty walking short distances) ☐  
3) **Hearing** (e.g. deafness or partial hearing) ☐      4) **Difficulty learning, concentrating or remembering** ☐  
5) **Mental health problems** ☐      6) **Stamina or breathing difficulty** ☐      7) **Social or behavioural issues** ☐  
8) **Difficulty speaking or communicating** ☐      9) **Dexterity difficulties** (e.g. lifting, grasping or holding objects) ☐  
10) **Long-term pain or discomfort that is always present or reoccurs from time to time** ☐  
11) **Other long-standing illness or disability**.....  
12) **Prefer not to say** ☐      13) **None of the above** ☐

How did you first hear about our bowling club?: .....

Have you been a member of another bowling club. YES / NO

If yes, please give details:.....

### Disclosure – The Griffin Bowls Club has a duty of care to all its members and visitors of all ages.

We need to be aware of anything which might reasonably influence our decision to accept you as a Member of this club.  
Failure to disclose would make you liable for expulsion. Is there anything you should disclose? YES/NO

**The current annual playing subscriptions are as follows: Full - £105, Associate Bowling - £55, Student (with a valid Student Identity Card) - £50, Associate Non-Bowling - £10 (£5 if your husband/wife/civil partner is a full member), Junior (9-18years old or Youth Group) - £5**

Please pay by BACS if possible to A/c No. 49028668, Sort code 30-99-50 for the full amount, which will be returned if the application is not successful. Alternatively, attach a cheque (Payable to The Griffin Bowls Club) or pay by card on the Open Days.

Please state which membership category you have chosen. ....

It should be understood that the club is run by its members and members are asked to assist in maintaining the fabric and/or day to day running of the club. Requests are made with consideration for the availability and ability of the member, however there is an expectation that members will do their best to make a contribution.

Signed.....(Applicant) Date.....

On completion, this form should be sent to the Club Treasurer: Mrs Alison Curtis

11 Rosemount, Harlow, Essex. CM19 4HS Tel: 01279 418699/07488 713706 Email: [alisonm.rosemount@gmail.com](mailto:alisonm.rosemount@gmail.com)

or presented to the Treasurer at the pre-season meeting or on the Open Days.

The Griffin Bowls Club, Latton Bush Centre, Southern Way, HARLOW, Essex CM18 7BL (01279 451338)