

# Kings Newton Bowls Club - Membership Application Form

Please visit the club premises to review the constitution, rules and associated policies before you apply for membership. The constitution explains the membership application process. The constitution and policies of the club describe our expectations of all members.

To ensure we have the correct contact details for you, please fill out this form and give it to the Club Secretary, Club Treasurer or Club Chairman. Contact details are displayed on the club information board.

If you are a child or consider yourself to be a vulnerable adult (see \* for definitions) please ensure your parents/guardian/carer has signed the form before it is returned.

We will also use this information to ensure that you are kept informed about club events.

## Applicant Details

|  |  |               |
|--|--|---------------|
| Name:  |  |               |
| Address:   |  |               |
| Postcode:  |  |               |
| Home Telephone Number:                                     |  |               |
| Mobile Number:   |  |               |
| Email Address:   |  |               |
| Male or Female   |  | Date of birth |
| Is the applicant a child or vulnerable adult (see * below) |  |               |

If your application is approved then your name, address and phone number(s) will be available to all members unless you request otherwise. All other information provided will be confidentially stored by the Club Secretary.

## Type of membership you are applying for

The club subscription fees for the types of membership are displayed on the club information board.

| Please tick as appropriate  |  |
|-----------------------------|--|
| Full / Ordinary Member      |  |
| Social / Non-Playing Member |  |
| Junior Member               |  |

## Bowling Information

|  |  |
|--|--|
| Do you have a coaching qualification? Please include brief details.                                      |  |
| Have you played bowls before? Please briefly say when and where and at what level e.g. social or league. |  |
| British Crown Green Bowling Association Number (if you have one and know it)                             |  |

### Emergency Contact Details

Please insert the information below to indicate the person(s) who should be contacted in the event of an incident/accident.

|                            |  |
|----------------------------|--|
| Contact name:              |  |
| Emergency Contact Number:  |  |
| Relationship to applicant: |  |

### Signature(s)

By signing this form you are declaring that you will abide by the club constitution and associated policies. Your application will be reviewed at the next scheduled committee meeting and the decision communicated back to you within one week after that meeting.

|   |  |
|---|--|
| Have you read the club constitution and associated policies (Yes / No)?                                     |  |
| Signature of Applicant.   |  |
| If applicant is a child / vulnerable adult (see * below) then the Parent / Guardian / Carer must sign here. |  |
| Date.   |  |

\* Definition of Children and Vulnerable Adult

**Children:** A child is defined as a person under the age of 18 (Children's Act 2004)

The Bowls Club has a Safeguarding policy displayed on the information board. The name and contact details of our Safeguarding Officer is also displayed on the board.

**Vulnerable adults:** A person aged 18 or over who receives services of a type listed in paragraph (1) below, and in consequence of a condition of a type listed in paragraph (2) below, has a disability of a type listed at (3) below.

1. The services are:

- Accommodation and nursing or personal care in a care home
- Personal care or support to live independently in his or her own home
- Any service provided by an independent hospital, independent clinic, independent medical agency or National Health Service body
- Social care services; **or**
- Any services provided in an establishment catering for a person with learning difficulties

2. The conditions are:

- A learning or physical disability
- A physical or mental illness, chronic or otherwise, including an addiction to alcohol or drugs; **or**
- A reduction in physical or mental capacity

3. The disabilities are:

- A dependency on others in the performance of, or a requirement for assistance in the performance of, basic physical functions
- Severe impairment in the ability to communicate with others; **or**
- Impairment in a person's ability to protect him or herself from assault, abuse or neglect