

UNDERCROFT BRIDGE CLUB INC.

MEMBERSHIP APPLICATION FORM

BLOCK CAPITALS PLEASE

Name.....Known as.....

Address.....Suburb.....

Post Code..... Tele No.....

email..... **Please write clearly**

Date of Birth dd/mm/..... **Please circle M / F**

In Case of Emergency Contact Name.....

Tele No

PRIVACY ACT Are you happy for your telephone number to be published **YES / NO**

Proposed By :**Date..... Please print**

Seconded By :**Date..... Please print.....**

If you are taking lessons please **ASK** the **TEACHER** to arrange a Proposer & Seconder

If you are a new member and don't have friends who can Propose or Second you please **ASK** the **DIRECTOR**

On applying for membership of Undercroft Bridge Club Inc. I agree to abide by the constitution and rules of the club.

Signature.....Date.....

CIRCLE ONE OF THE FOLLOWING OPTIONS

1. I am a **new member** without an ABF number

Have you ever been a member of an overseas club ? Yes / No

Country.....Name of club.....

2. I am applying to **transfer** my membership

Name of club transferring from :ABF Number.....

3. I am applying for **Associate Membership**

Name of Home Club :ABF Number.....

4. I am applying to **reactivate** my membership

ABF Number.....

Payment to be included with this application (please circle)

a) Cash and application form placed in an envelope and put in the **RED PAYMENT box.**

b) Cheque and application form placed in an envelope and put in the **RED PAYMENT box.**

c) Direct Debit payment slip & application form in an envelope and place in the **RED PAYMENT box.**

Bank Details:

A/C Name: Undercroft Bridge Club

BSB: 066 192

A/C No: 10664197

reference with **BOTH GIVEN NAME & SURNAME** and **ABF NUMBER** if you have one

Your name is added to the data base of UBC Pianola, ABF (Aust. Bridge Fed.) and MyABF competition website

NOTE: NEW MEMBERS ARE NOT ELIGIBLE TO PARTICIPATE IN RED POINT EVENTS UNTIL THEIR APPLICATIONS HAVE FOLLOWED CLUB PROCEDURE AND RECEIVED COMMITTEE APPROVAL

OFFICE USE ONLY:

Office	Treasurer	Committee	M.P.S.	Membership Sec.
Date				
Signature				