

*THE ILLAWARRA BRIDGE ASSOCIATION INC.*  
(Incorporated under the Associations Incorporations Act 1984)

MEMBERSHIP APPLICATION

I, .....  
(full name of applicant)

of .....  
(address)  
..... Post code .....

Phone: ..... (mobile).....

Email: .....

hereby apply to become a member of the above-mentioned association. In the event of my admission as a member, I agree to be bound by the Rules of the Association for the time being in force.

.....  
(Signature of applicant) Date .....

Are you a Pensioner/Concession Card Holder? Yes / No

ABF number (if already registered) ..... Home Club.....

Date of Birth ..... (Year optional)  
[Date of birth is required by the ABF to prevent accidental duplicate memberships]

I would like the Annual Report delivered by:

Email  Web site

I am happy to have my phone number listed in the Club Calendar

I,....., being a member of the Association, second the nomination of the applicant, who is known by me, for membership of the Association.

.....  
(signature of seconder)  
Committee Approval: 1) .....(2) .....

IBA use:

- |  |   |
|--|---|
| 1. <input type="checkbox"/> Club Calendar supplied<br>Signed as Seconder | 5. <input type="checkbox"/> Master Points Secretary<br>ABF/Club number assigned |
| 2. <input type="checkbox"/> Treasurer Fees paid                          | 6. <input type="checkbox"/> Number entered in computer                          |
| 3. <input type="checkbox"/> Secretary Data base                          | 7. <input type="checkbox"/> Secretary Filed                                     |
| 4. <input type="checkbox"/> Committee endorsement                        |   |