Membership Application Form - Adult

Thank you for choosing to join Etherow Indoor Bowling Centre, we look forward to welcoming you and hope you enjoy your bowling with us. To activate your membership, please bring this completed form with the appropriate membership fee to the centre.

Your membership will cover the current membership year which runs from 1st October to 30th September the following year.

MEMBER DETAILS			
First Name		**Surname**	
Date of Birth			
Address			
Postcode			
Telephone		**Mobile Number**	
Email Address			

EMERGENCY CONTACT DETAILS Please insert the information below to indicate the persons who should be contacted in event of an incident/accident.			
Name			
Relationship		**Contact Number**	

COMMUNICATION PREFERENCES					
Etherow Indoor Bowling Centre take the protection of the data that we hold about you as a member seriously. Please read the full privacy notice carefully to see how we will treat the personal information that you provide to us which can be found at the Centre or on our website at: https://etherow-ibc.co.uk/index.php/privacy-policy/.					
I would like to receive news and updates from the centre that may be relevant to me by:					
Email	Yes / No *	**SMS/Text**	Yes / No *	**Post**	Yes / No *

DISABILITY STATEMENT	
Disabled	I consider myself to have a disability / I do NOT consider myself to have a disability *

(* Delete as appropriate)

GIFT AID STATEMENT (CHECK THE BOX TO INDICATE AGREEMENT)
☐ I am a UK taxpayer and would like The Etherow Charitable Trust to reclaim the tax on my membership fees and any additional donations I have made in the last four years and for all future gifts of money that I make to be Gift Aid donations. I understand that if I pay less Income Tax and/or Capital Gains tax than the amount of Gift Aid claimed on all my donations in that tax year then it is my responsibility to pay any difference.

DECLARATION			
By completing this form, I confirm that I would like to apply for membership of Etherow Indoor Bowling Centre and I consent for my details to be stored and used by Etherow Indoor Bowling Centre for the purposes of administering membership, responding to emergencies and, if I have opted in, for keeping me up to date with relevant news and events. I also agree to abide by the centre rules for play which can be found on the Etherow IBC website and are displayed in the centre.			
Optional Additional Donation to Etherow Charitable Trust		**£**	
Signature			
Print Name		**Date**	

ADMIN USE ONLY			
Member Number			
Membership Type		**Fee Paid**	
Processed By		**Date**	