**Jedburgh Bowling Club**

**Membership Application Form**

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| **Name:** |  |
| **Address:** |  |
| **Date of Birth:** |  |
| **Gender:** |  |
| **Contact Tel:**  **Including mobile:** |  |
| **E-Mail:** |  |
| **Current/Previous Clubs:** |  |
| **Category of membership.**  **Please Circle** | Full Member Junior Member Associate Member |
| **How Did You Find Out About Us?** |  |
| **Referring Member (if applicable)** |  |
| **Date** | **Signature** |

Please complete and return this form to :

John Taylor, Club Secretary, Jedburgh Bowling Club, Allars Mill, Jedburgh, Roxburghshire TD8 6NR

or alternatively email to jedbowlingclub@btinternet.com

You can find us on

Facebook: Jedburgh Bowling Club

Web: Jedburgh Bowling Club.co.uk