



# Registration Form for BCGBA Membership



<b>County Association:</b>	<b>Merseyside County Crown Green Bowling Association</b>
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<b>Club Name:</b>		<b>Club Membership Number:</b>			
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Number ~	Mr/ Mrs/Miss /Ms	First Name	Name 2	Surname	Gender M/F	Date of Birth (DD/MM/YYYY)

~ Applications for a Replacement Card only

Please give reason for requesting a replacement card (eg card lost, card damaged, change of name):

Address	Post Code	Email	Tel: Landline	Tel: Mobile

<b>Ethnic Origin *</b>	<b>Disability or Serious Illness #</b>

\* This is required to show that the sport welcomes all ethnicities  
- it would be appreciated if you could complete the above box

# This is to assist the sport in supporting members with any individual needs  
- if no assistance is required please leave the above box blank

**Card to be returned to:**

<b>Applicant</b>	<input type="checkbox"/>	Please tick your preferred option
<b>Club Secretary</b>		

- If you have selected Club Secretary then please give their name and full address below

I enclose a cheque to the value of £ \_\_\_\_\_ (£12 for a new player, £4 for a replacement card)

<b>Cheque to be made payable to: Merseyside County CGBA</b>
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<b>Send to Acting County Registrar: Kye Gorman</b>	
<b>Address: 94 Fishers Lane, Pensby, Wirral, CH61 8SB</b>	
<b>Phone: 07753 959370</b>	<b>E-mail: mccgbaregistrar@gmail.com</b>

**Data Consent:** The information given on this membership registration form will only be used in connection with your BCGBA Membership and will not be shared with any other organisation.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_