

MEMBERSHIP APPLICATION

1/2

When completed, this form goes to the CLUB SECRETARY



Pacific Indoor Bowls Club

4588 Clancy Loranger Way, Vancouver, British Columbia V5Y 5B6

NAME [REQUIRED] _____

RETURNING MEMBER, update contact information ONLY IF CHANGED

Please complete a separate form for each household member.

Land Line Phone: _____ Cell Phone: _____

Email Address: _____

Address: _____ Apt: _____

City: _____ Postal Code _____

Emergency Contact: _____

Relationship: _____ Phone: _____

The following information is required and collected for statistical and reporting purposes. The information collected is aggregated and individuals are not identified.

Returning Member New Member Outdoor Club _____

Gender Identity: Female Male Other

Age Category – (please circle) 18 & under 19-30 31-50 51-65 66+

The following request for your consent is a requirement of the Personal Information Protection Act of British Columbia. I CONSENT TO:

My Name and phone number(s) in PIBC's Membership Directory*..... YES NO

Including my email address in PIBC Membership Directory*..... YES NO

Receiving Club notices and newsletters by email YES NO

Using my name and/or image on the Club website YES NO

** PIBC Membership Directory is only for internal use only and not distributed outside the Club.*

Signature

Date

I am familiar with the House Rules, Conditions of Play and Code of Conduct as published on the PIBC website and I agree to fully abide with them. _____ *initial*