



MARION NIGHT OWLS

REGISTRATION FORM

Season 2018 /2019



TEAM NAME

NAME OF CONTACT PERSON (Team Manager) **NIGHT: Tuesday / Wednesday**

ADDRESSTELEPHONE (Home) (Mobile)

SUBURBPOSTCODE (Business Phone)

EMAIL ADDRESS.....

OTHER TEAM MEMBERS - Minimum four players (including Team Manager).

Given Name (for badge)	Surname	Address	Suburb	Post Code	Telephone No.	Email Address

If all team members are not yet recruited, this Registration Form can be lodged and other name(s) added later.

DO YOU REQUIRE TO BORROW BOWLS FROM THE CLUB Yes / No IF YES, HOW MANY? (2 bowls per player)

Please Return This Form to the Marion Bowling Club by Friday 14th September Together with the Required Fee - \$66. Per Team of Four Plus \$11. For Each Additional Player.
(Registration for a single player without a team - \$16.50)

Please make Cheques payable to: Marion Bowling Club, Inc. Required Fee \$..... herewith.

EFT Details: Bank SA Account – Marion Bowling Club BSB 105 131 Account No. 042309740