

APPLICATION FORM FOR MEMBERSHIP OF
ILLAWARRA BILLIARDS & SNOOKER ASSOCIATION
(under the Associations Act. 1984)

REGO NUMBER ----- (Office use only)

I-----
(Full name of Applicant)

of-----
(Number) (street)

(Suburb) (Postcode) (Telephone Number)

hereby apply to become a member of the Illawarra Billiards & Snooker Association. In the event of my admission as a member. I hereby agree to be bound by the rules of the Association for the time being in force.

(Signature of Applicant)

I-----
(Full Name) (Rego Number)

being a full member of the Illawarra Billiards & Snooker Association nominate the above applicant , who is personally known to me , for membership to the Association.

(Signature of nominator)

I-----
(Full Name) (Rego Number)

being a full member of the Illawarra Billiards & Snooker Associations. second the nomination of the above applicant , who is personally known to me , for membership to the Association.

(Signature of seconder)

Date-----/-----/-----

INTENDED CLUB-----

Recommended Playing Division----- (To be completed by intended Club)