

FORM A: REGISTRATION

ESSEX COUNTY WOMEN'S BOWLING ASSOCIATION

THE FOLLOWING PARTICULARS MUST BE IN THE COUNTY SECRETARY'S HAND BY 31ST DECEMBER 2024

YOU MUST INCLUDE AN E-MAIL CONTACT AND USE LEGIBLE BLOCK CAPITALS

NAME OF CLUB

YEAR AFFILIATED TO ECWBA:

NUMBER OF FEMALE MEMBERS:

CLUB ADDRESS

.....

..... POST CODE:

CLUB TEL. NO.:

PLAYING SURFACE: synthetic / grass

SECRETARY'S NAME:

ADDRESS:

.....

..... POST CODE:

TEL. NO:

E-MAIL:

MATCH SEC'S NAME:

ADDRESS:

.....

..... POST CODE:

TEL. NO:

E-MAIL:

DELEGATE'S NAME:

E-MAIL:

OPTIONAL NAME:

E-MAIL

PLEASE RETURN FORM A AND FORM B TO HON. SECRETARY JILL POLLEY

PLEASE RETURN FORM C TO HON. TREASURER JENNY HYLAND

PLEASE RETURN THE FORMS VIA EMAIL OR POST BY 31ST DECEMBER 2024

THE AFFILIATION FEE MUST BE PAID FOR EACH FEMALE BOWLING MEMBER

USE A CONTINUATION SHEET IF YOU HAVE MORE THAN 42 LADIES

ALL COMPETITORS SHOULD HAVE A HANDBOOK + ONE FOR THE CLUB

PLEASE ORDER THE HANDBOOKS ON FORMS B AND C

FORM A WILL BE USED TO UPDATE YOUR CLUB'S INFORMATION ON THE DATABASE

ALL CORRESPONDENCE WILL BE SENT TO THE SECRETARY AND DELEGATE.

IF AN ADDITIONAL PERSON WOULD LIKE TO RECEIVE THE PAPERWORK PLEASE

ADD THEIR OPTIONAL DETAILS TO FORM A

Please return this form to the County Secretary, Jill Polley