



**CALOUNDRA CONTRACT BRIDGE CLUB INC**  
**APPLICATION FOR MEMBERSHIP**  
**MONEY MUST ACCOMPANY THIS FORM**

Surname:	First name:			
Mailing Address:				
<u>Day &amp; Month</u> (year optional) _____ / _____ / Telephone:				
Email address (PRINT)				
Proposed by:	Signature:			
Seconded by:	Signature:			
Applicant's ABF Status: <input type="checkbox"/> Never been an ABF member <input type="checkbox"/> Existing ABF member - please make CCBC my Home club for ABF purposes <input type="checkbox"/> Existing ABF member - my Home club will remain at another club for ABF purposes <input type="checkbox"/> Lapsed ABF member - please re-activate me and make CCBC my Home club for ABF purposes ABF Number (if existing or lapsed ABF member) _____ Existing club name and number (This is required if you're transferring, or retaining another club as your Home club) _____				
Alternative contact person - name, address, phone number: _____				
<b>FINANCIAL YEAR SUBSCRIPTIONS</b> (Club financial year runs from. January to December, ABF/QBA year runs April to March.)				
<b>Month of joining &gt;</b> <b>(Tick appropriate box)</b>	Jan - Mar <input type="checkbox"/>	Apr - Jun <input type="checkbox"/>	Jul - Sep <input type="checkbox"/>	Oct - Dec <input type="checkbox"/>
Joining fee and membership fee	\$28.00	\$28.00	\$19.00	\$19.00
ABF Levy	\$16.00	\$16.00	\$16.00	\$8.00
QBA Levy	\$16.00	\$16.00	\$16.00	\$8.00
<b>Total</b>	<b>\$60.00</b>	<b>\$60.00</b>	<b>\$51.00</b>	<b>\$35.00</b>
<b>I here apply for membership of the Caloundra Contract Bridge Club Inc, and agree to be bound by its rules.</b> <b>Applicant's signature</b> _____ <b>Date</b> ____ / ____ / ____				

NOTES:

1. This form should be handed to the Director of the day or a Committee member, together with the calculated subscription fee.
2. The committee reserves the right to reject applications in accordance with its legal powers

**OFFICE USE ONLY**

Accepted at meeting:

MP Secretary:

ABF No issued:

Welcome letter:

Compuscore: