



Selection and Competition Module Application Form

I would like to attend (Please tick): Selection Module \$50.00 Competition Module \$50.00

Title: _____ Surname: _____ Given Names: _____

Address: _____

Suburb: _____ State: _____ P/C: _____

Home Ph: _____ Business Ph: _____ Mobile: _____

Email: _____ Date of Birth** _____
**** DOB is a Bowls Australia Mandatory Requirement**

Bowls Club: _____ **District/Zone:** _____

Current NCAS Details (if applicable):

NCAS/NOAS Number: BA _____ Expiry Date: _____

Declaration

I acknowledge that:

- I will obtain working with children check as per my state requirements.
- My information will not be used or disclosed except in accordance with the provisions of the Privacy Act 1988. I may be contacted directly by Bowls Australia regarding my coach accreditation and my information will not be passed on to any 3rd party.

If you have any privacy concerns or would like to verify information we hold about you, please contact Bowls Australia. I have read and I understand the above conditions:

SIGNATURE: _____ DATE: _____

Parent / Guardian Signature _____ DATE: _____
(Parent or Guardian must Sign if under 18 Years old)

<p>Bowls NSW (Men) Payment Details</p> <p>Please accept my payment of \$_____ by:</p> <p><input type="checkbox"/> Cheque/ Money Order</p> <p><input type="checkbox"/> Direct Deposit Royal NSW Bowling Association Commonwealth Bank BSB: 062-018 Account: 1032 6652 Please notify of deposit via email to rnsdba@rnsdba.org.au</p> <p><input type="checkbox"/> Credit Card Card Type: _____</p> <p>Name on Card: _____ Card No: ____ / ____ / ____ / ____</p> <p>Expiry Date: ____ / ____ CVC #: _____ Signature: _____</p>	<p style="text-align: center;">RETURN TO</p> <p>Please send completed Application Form to:</p> <p>Mail: RNSWBA Coach Education Coordinator PO BOX A2186 Sydney South NSW 1235 Email: rnsdba@rnsdba.org.au Fax: 02 9283 4252</p>	<p>NSWWBA Inc. (Women) Payment Details</p> <p>Please accept my payment of \$_____ by:</p> <p><input type="checkbox"/> Cheque/ Money Order</p> <p><input type="checkbox"/> Direct Deposit Westpac Banking Corporation BSB: 032-006 Account: 41 5377 Please notify office of deposit by email to reception@womensbowlsnsw.org</p> <p>Please Note: Prior to depositing money please request an invoice number, Invoice number & your Club Name MUST be used as a reference for direct deposit.</p>	<p style="text-align: center;">RETURN TO</p> <p>Please send completed Application form and Payment to:</p> <p>Mail: NSWWBA Inc. 7th Floor, 309 Pitt Street Sydney NSW 2000 Phone: (02) 9267 7155</p>
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