



### Registration Form for BCGBA Membership



<b>County Association:</b>	BRITISH PARKS CGBA	<b>County Membership Number:</b>	BCG	100	21
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<b>Club Name:</b>		<b>Club Membership Number:</b>			
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Number ~	Mr/ Mrs/Miss /Ms	First Name	Name 2	Surname	Gender M/F	Date of Birth

~ Applications for a Replacement Card only

Address	Post Code	Email	Tel: Landline	Tel: Mobile

<b>Ethnic Origin *</b>	<b>Disability or Serious Illness *</b>

\* Please see notes for further information on these two boxes

Card to be returned to:

Club Secretary  
Applicant

<input type="checkbox"/>	Please tick your
<input type="checkbox"/>	preferred option

I enclose a cheque to the value of £

(£10 for a new player, £3 for a replacement card)

<b>Cheque to be made payable to: B.P.C.G.B.A</b>
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<b>Send to County Registrar:RAYMOND LORIMER</b>	
<b>Address:170 WHITELEES ROAD, LITTLEBOROUGH, LANCASHIRE, OL15 8DU</b>	
<b>Phone:07742501392</b>	<b>E-mail: rayjlorimer@aol.com</b>

*If you wish to make an electronic payment please contact the County Registrar.*

**Please note:** The information given on this membership registration form will only be used in connection with your BCGBA Membership and will not be shared with any other organisation.