

**Club Details – please complete**

	<b>YES</b>	<b>NO</b>
Open All Year Round? If not, please specify when open		
Open for new members?		
Visitors welcome?		
Do you intend to have classes?		
Bar?		
Tea / Coffee?		
Car Parking?		
Spare Partner available ?		

**NEW CLUB**

**APPLICATION FORM TO AFFILIATE**

1. **NAME OF CLUB** \_\_\_\_\_

2. **ADDRESS OF CLUB  
(PLAYING ADDRESS)** \_\_\_\_\_  
\_\_\_\_\_

3. **DAYS AND STARTING TIMES OF  
WEEKLY BRIDGE** \_\_\_\_\_  
\_\_\_\_\_

4. **NAME AND ADDRESS  
OF PRESIDENT** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. **NAME, ADDRESS AND  
PHONE NO. OF  
SECRETARY** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Email Contact for Club** \_\_\_\_\_

6. **NAME AND ADDRESS  
OF TREASURER** \_\_\_\_\_  
\_\_\_\_\_

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Secretary*

**When completed, this form is to be forwarded through your Regional Secretary to National Headquarters.**

