



Karori Bridge Club

Incorporated

274 Karori Road, Karori, Wellington. Tel: (04) 476-6179

Email: karoribridge@gmail.com

Website: <http://www.karoribridge.com>

Application for Membership

Surname _____ Title _____ (if left blank correspondence will be addressed without title)

Initials _____ Preferred Name _____

Home Address: Street Number / Name _____

Suburb _____ Postal Code _____

Postal Address (if different) _____

Telephone No: (Home) _____ (Business) _____ (Cellphone) _____

Email Address _____

(Giving your address indicates your approval for the Club to send your newsletters, etc) (please tick box if you agree to your email going into the programme book)

Membership Full _____ 2nd Club _____ Associate _____ Youth (under 25) _____ Social _____

Present / Previous Clubs (if applicable) _____

Home Club (Please nominate if above applicable) _____ Computer Number _____

Club sessions – Evenings Tuesday (A grade) _____ Thursday (R & B grades) _____

Afternoons - Monday (MIXED) _____ Friday (MIXED) _____

NZ Bridge Master Points (If applicable) (A) _____ (B) _____ (C) _____ Rating Points _____

(Australian / European Master Points can be converted – not U.S.A.)

Privacy Act

- As an affiliated club it is required that KBC members' names, gender, computer number and playing results are forwarded to New Zealand Bridge Inc.
- Unless advised to the contrary members' names and telephone numbers will be published in the Karori Bridge Club programme book.

I agree to abide by the rules of the Karori Bridge Club Inc (on notice board)

Signature of applicant _____ Date _____

Signature of Proposer _____ Seconder _____

COMMITTEE:- APPROVED / REJECTED

Signed _____ Date _____