

**BEDFORD BOROUGH BOWLING CLUB**  
**GOLDINGTON ROAD,**  
**BEDFORD MK40 3NF**

**Membership Change Details**

This form can be completed by the member, the Office staff or a member's family.

<b>NAME OF MEMBER (PLEASE PRINT)</b>
<b>BOWLING CATEGORY</b>
<b>YOUR NAME IF YOU ARE NOT THE MEMBER.</b>
<b>YOUR TELEPHONE NUMBER</b>
<b>YOUR E MAIL ADDRESS</b>
<b>THE ABOVE DETAILS WILL ONLY BE USED IF THE OFFICE NEED TO CHECK MEMBERSHIP DETAILS.</b>
<b>ANY OTHER RELEVANT INFORMATION</b>

[In keeping with the General Data Protection Act.](#)

[All your/or the members personal details will be removed from the Club register at the next management meeting.](#)

**PLEASE RETURN THIS FORM TO THE OFFICE.**