



BRIDGE SOCIAL MEMBERSHIP FORM

1st October 2025 - 30th September 2026

NAME :- Mr. Mrs. Miss First Name _____ Surname _____

ADDRESS :- _____
Postcode: _____

TEL No: _____ **MEMBERSHIP No :** _____
Home Work/Mobile

Have you changed your address or phone number since last year? Yes / No

E-MAIL ADDRESS: _____

GDPR: Your personal data is used by GIBA LBG for administration purposes only and will not be disclosed for any other purpose. We will delete 5 years after you cease to be a member.

I, _____ hereby apply to the Guernsey Indoor Bowling Association LBG for membership of the Association as a Bridge Social Member.

By signing this form I accept that I am bound by the Rules of the Association contained in the Association's Articles and the Association's bye-laws.

My payment of £50.00 is enclosed.

Debit or Credit Card payment accepted. **BACS** payments can be made to;

Account: GIBA LBG Sort Code: 60-09-20 Number: 74425234

SIGNED :- _____ **DATE :-** _____

Age Group at 1st October: Under 18 ☐ 18-30 ☐ 31-40 ☐ 41-54 ☐ 55-64 ☐ 65-75 ☐ Over 75 ☐

Official use: Amount received: £ _____ Card completed ☐ Initials ☐