

EMAIL CONTACT FOR RNSWBA ONLINE FACILITY AUTHORISATION (CLUB)

Name:		
Club:		
Position:		
Email Address:		
I,	of	Bowling Club, declare
that I am the only authori	zed Official to obtain player and As	ssociation documents on behalf of the
Club. I also declare that I	will be the sole contact for this ema	ail address.
Signature:		
<u> </u>		
Date:		