Application for Bowls Queensland Official Representation

Please indicate if this is a district or club event by ticking the relevant box.

Club ☐ _____ or District ☐ _____

(Club Name) (District Name)

Event/Function: _____

Venue: _____

(Host Club)

_____

(Street Address)

Day & Date: _____ Running Time: _____

Preferred Arrival Time: _____ Approx Finish Time: _____

District/Club Contact Name: _____ Phone No: _____

Board Chairman: _____ Phone No: _____

Board Secretary: _____ Phone No: _____

President: _____ Phone No: _____

Secretary: _____ Phone No: _____

Special Invitees Attending (if any e.g. Members of Parliament, Local Councillors, Sponsors etc) _____

_____

Type of Game (if played – e.g. triples, fours) _____ No. of BQ Representatives invited: _____

Signed: _____ Dated: _____

(Club Secretary)

This form must be forwarded to your district for approval.

Reply to this invitation will be forwarded to the district.

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District Approval: I advise that the above invitation has district approval.

Signed: _____ Dated: _____

(District Secretary)

District: _____

Post To: Bowls Queensland
PO Box 476
ALDERLEY QLD 4051

Fax: (07) 3855 0010

Email: admin@bowlsqld.org

Bowls Queensland Office Use Only

Attendees: _____

_____

_____

_____

Accommodation Required: Yes / No

Date Replied :_____/_____/_____ Actioned By: _____