

ANDOVER ANGLING CLUB.

APPLICATION FOR MEMBERSHIP

MR / MRS / MASTER / MISS Surname _____

Forename _____

Address _____

Postcode _____

Telephone Number _____

Email Address _____

Please note: In accordance with the Data Protection Act 1998, all membership details of existing members will remain with Andover Angling Club and will not be divulged to a third party.

TYPE OF MEMBERSHIP REQUIRED

ADULT MEMBERSHIP	Add £ for non-attendance of AGM Deduct £ for attendance at work parties (5% per work party – max 25%)	£
NEW MEMBERS – Joining Fee	For senior members only – old licence must be shown or they must be listed on members list to prove previous membership of club	£
JUNIOR – Aged 12 to 16	Date of birth.....	£
DISABLED		£
OAPs	Date of birth.....	£
NIGHT PERMIT	Available to senior members only	£
GOLD CARD		£
	TOTAL FEE PAYABLE	£ _____

Existing Membership Number _____ New Membership Number _____

I have read the Club rules and agree to be bound by the rules of the club SIGNATURE _____