

MT LARCOM DISTRICT FISHING CLUB INC

MEMBERSHIP APPLICATION FORM

I _____ wish to apply for membership of the above club. Membership will be Family or Individual

Family members

	Adult / Junior
	Adult / Junior
	Adult / Junior
	Adult / Junior
	Adult / Junior
	Adult / Junior

Junior members are under the age of 16 at 1st July.

I agree to be bound by the rules of the Club.

Signed _____ Date _____

Contact details.

Address _____

Phone _____

Email _____

Nominated _____

Seconded _____

Date of Meeting _____

PAYMENTS

DATE	AMOUNT	DATE	AMOUNT