



P.O. Box 335, Hastings 3915

APPLICATION FOR MEMBERSHIP

I,.....

(Full name of applicant)

Of

(Address)

.....(Occupation) wish to become a member of the
WESTERNPORT ANGLING CLUB.

PHONE: Work.....

Home.....

Mobile.....

E-Mail.....

In the event of my acceptance as a member by the Committee, I agree to observe the rules and by-laws of the association. I acknowledge that my membership may be terminated at the expiration of 28 days from failure to abide by these said rules.

..... (Signature of applicant)

...../...../..... (Date)

I,..... (Name) a member of the Association, nominate the applicant, who is personally known to me, for membership of the Association.

..... (Signature of proposer)

...../...../..... (Date)

I,.....(Name) a member of the Association, second the nomination of the applicant, who is personally known to me, for membership of the Association.

...../...../..... (Date)