

**THE WILLIAMSTOWN NEWPORT ANGLERS' CLUB AND FISH PROTECTION SOCIETY
INCORPORATED (ASSOCIATION)**

APPLICATION FOR MEMBERSHIP

I,.....(*full name of applicant*)

of..... (*address*)

.....(*occupation*)Date of Birth

desire to become a(*here state classification***) member of
the Association.

If I am admitted as a Member, I agree to be bound by the rules of the Association for the time being in
force.

I agree / do not agree to the distribution of contact details to other Association Members

.....Signature of Applicant.....Date

Email Address

Home Phone.....Mobile Phone.....

I,..... (*name*) being
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*) being
a Member of the Association, second the nomination of the applicant, who is personally known to me,
for membership of the Association.

.....Signature of Seconder.....Date

**** Membership Classification**

- | | |
|-----------------------|--|
| <i>Metropolitan</i> | a member ordinarily resident within the Melbourne metropolitan area |
| <i>Country</i> | a member ordinarily resident outside the Melbourne metropolitan area |
| <i>Junior</i> | a member of less than 18 years of age |
| <i>Junior Country</i> | a member of less than 18 years of age and ordinarily resident
outside the Melbourne metropolitan area |

Nomination Fee Receipt Number

Membership Fee Receipt Number

Club Records Updated

(Date / Initials)