FAVERSHAM ANGLING CLUB

Application for Senior/Concessionary Membership

Membership Details

Please complete the following information in full and return the form together with TWO recent PASSPORT PHOTOGRAPHS to the address shown below.

Mr ☐ Mrs ☐ Miss ☐ Ms ☐

Forenames:	
Surname:	
Address:	
Postcode:	
Telephone Number:	
Mobile Phone Number:	
Email Address:	
Date of Birth:	

Type of fishing preferred? (Please tick)

Match :	☐	Pleasure:	☐

Specimen fishing for:

Carp:	☐	Pike:	☐	Tench/Bream:	☐

Please indicate below your reasons for wanting to join Faversham Angling Club:

It is a requirement of membership that you are proposed by two existing club members who can vouch for your honesty and integrity. Both of your proposers should complete and sign the details below.

Proposer 1	
Membership No.	
Name:	
Signed:	

Proposer 2	
Membership No.	
Name:	
Signed:	

Please return the completed form to:

Faversham Angling Club, 1c St. Nicholas Road, Faversham, Kent ME13 7PG
Telephone: (01795) 590824 (Evenings only please)
*****PERSONAL CALLERS BETWEEN 7.30pm AND 8.30pm ONLY PLEASE*****

Office Use Only

Date application received: ____ / ____ / ____