

Parkway Pirates Fishing Club

MEMBERSHIP RENEWAL 2016 - 2017

PLEASE FILL IN ALL DETAILS CLEARLY AND THOROUGHLY

PERSONAL DETAILS:

Name: Mr / Mrs / Miss _____
Address: _____
Suburb: _____ Post Code: _____
Date of Birth: _____
Ph Number: _____ Mobile: _____
Email: _____
Occupation: _____

EMERGENCY CONTACT NUMBERS: (Parent's Details if Sub Junior or Junior Member).

Name: _____ Ph Number: _____
Name: _____ Ph Number: _____

KIDS DETAILS:

Name: Mstr / Miss _____
Date of Birth: _____
Name: Mstr / Miss _____
Date of Birth: _____
Name: Mstr / Miss _____
Date of Birth: _____
Name: Mstr / Miss _____
Date of Birth: _____

FEES:

	<u>Annual Membership</u>
Ordinary Member:	\$40.00
Junior Member:	Nil
Sub-Junior Member:	Nil

Total \$: _____ Received By: _____ Receipt No: _____

Both the Parent and the Guardian must sign on behalf of all Sub Juniors and Juniors.

Signature:
(Member/Parent) _____ Date: _____
Signature:
(Guardian) _____ Date: _____