

PENRITH ANGLING ASSOCIATION APPLICATION FOR MEMBERSHIP

(Please do not send any payment with this form)

1. Mr / Mrs / Miss/ Mstr / Dr
2. FIRST NAME(S)
3. SURNAME
4. ADDRESS
- POSTCODE
5. TEL. NO.
6. E MAIL
7. DATE OF BIRTH
8. **MEMBERSHIP CATEGORY APPLIED FOR:** (Please tick as appropriate)

LOCAL () Who reside or have a second home for which they are accountable for council tax and not used for financial gain, within a twenty-mile radius of Penrith Post Office (note; all correspondence will be sent to local address). Caravans or mobile homes on sites that do not have a full 12 months residential licence are not included.

COUNTRY () Resident outside this radius
9. **MEMBERSHIP AGE CATEGORY APPLIED FOR:** (Please tick as appropriate)

SENIOR () Over the age of 21 on 15th January during the present season

JUNIOR () Aged 21 years and under on 15th January during the present season

SENIOR CITIZEN () Over the age of 65 (men & women) on 15th January during the present season
10. Please tick () if the married couples rate is applicable (see overleaf)
11. **Proposed by:**
Full name AND signature of existing member
12. **Seconded by:**
Full name AND signature of existing member
13. How did you hear about the Association ?

If you do not know any existing members but you wish to apply for membership, please write and give your reasons for wishing to join Penrith Angling Association together with some details about yourself.

We process personal data necessary to administer our membership records and provide services and benefits to members as a recreational angling club.

The secretary will send you an email or letter confirming the receipt of your application form, please contact the secretary if you do not receive any confirmation that it has been received within one week of sending.

PLEASE RETURN THIS FORM TO: Mr A Dixon, Honorary Secretary, Penrith Angling Association, 3 Newtown Cottages, Skirwith, Penrith, Cumbria CA10 1RJ