

Venus Bay Angling Club Inc.

MEMBERSHIP APPLICATION FORM



RENEWAL (Please fill in name and payment details only)

NEW MEMBER (Please fill in all details below)

	GIVEN NAME	SURNAME
NAME/S	1. _____	_____
	2. _____	_____
	3. _____	_____
	4. _____	_____
CHILDREN UNDER 16	1. _____	_____
	2. _____	_____
	3. _____	_____
	4. _____	_____
POSTAL ADDRESS	_____	

	POSTCODE _____	
PHONE	HOME _____	_____
	MOBILE _____	_____
EMAIL	_____	

***** Membership fees are \$30 for singles and families *****

MEMBERSHIP VALID FROM 1st Jan - 31st DEC

Subject to approval by the committee

METHOD OF PAYMENT	
CASH <input type="checkbox"/>	
CHEQUE <input type="checkbox"/>	Please make cheque payable to V B A C inc
BANK TRANSFER <input type="checkbox"/>	Venus Bay Angling Club inc BSB: 633-000 Account no: 135809325 Please use your Full Name as reference
PAYMENT OF \$ _____	PAYMENT DATE _____

V.B.A.C. Postal Address:

P.O. Box 141, Tarwin Lower, Vic, 3956