## **APPLICATION FOR MEMBERSHIP: 2024 / 2025**



Full Name of Member:		GAME FISHING CLUB
Address:		
P/C: DOB:	Occupation	
Phone:	. Mobile:	
Email:	Boat Name	(If Appl)
Membersh	nip Class – Please tick applicable cate	egory.
	unior 11 - 16 years Small Fry Und	
NOTE:- Membership to the club runs from	n 1 <sup>st</sup> July to 30 <sup>th</sup> June based on a Club financ	ial year.
	all cheques payable to Newcastle Game Fishing ication form & cheque to PO BOX 150, WICKHAN	
Paying by Bank Deposit – Details :- Grea	ter Building Society -A/c Name - NGFC-	BSB 637 000 - A/c 721827852
Reference: Your Last Name & Member Nur accounts@ngfc.com.au	mber ( if applicable ) Forward this form & receipt of	of payment to
•	a completed membership form along v GFC Secretary or Committee person p	•
Are you a member of another Club?	NO / YES – Club Name	
Have you ever been refused member	ership of a Club? NO / YES - Club Nam	ne
	e Newcastle Gamefishing Club Inc. In the y the rules / constitution of the club for the	•
Signature of Applicant	Date	
Office Use Only: Received by	•	Date
Approved by		
Joining Date Receipt No	Member No	