



ALICE RIVER ANGLERS INC. APPLICATION FOR MEMBERSHIP

PAYMENT DATE:

* ADULT NAMES

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* CHILDREN NAMES: AGE: D.O.B:

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* ADDRESS:

* SUBURB: POST CODE:

(If you would like any correspondence emailed to you please submit your email address:

.....

* TELEPHONE NUMBER:

* TYPE OF MEMBERSHIP: (PLEASE CIRCLE) **NEW / RENEWAL.**

*COST: SINGLE MEMBERSHIP \$35.00

 FAMILY MEMBERSHIP \$65.00

 JUNIOR MEMBERSHIP FREE

(MEMBERSHIP DUE BY 1ST JANUARY TO 31ST DECEMBER YEARLY)

PROPOSED BY:

SECONDED BY:

SIGNATURE OF ADULT MEMBERSHIP APPLICANTS:

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Pay by Direct Deposit: Bank: Queensland Country Credit Union
BSB: 654-000

Account No: 64137914 Account Name: Alice River Anglers Inc.
Please send remittance to: info@aliceriveranglers.org.au



ALICE RIVER ANGLERS INC.

CONDITIONS OF MEMBERSHIP INDEMNITY FORM.

Please read the following and sign below:

Please accept our nomination for membership with the Alice River Anglers Inc. for one year. I/we agree to the rules as per the constitution. In consideration of your accepting I/us as competitors or guests, I/we absolve the committee officers and members and Executive, Volunteers Assistants and concessionaires as such from any liability whatsoever and however arising from my/our involvement (whether at shore or at sea and including any liability resulting from the acts of omission of my/our boat, owner/skipper, deckhand, guest or other employee) in the clubs activities and we agree to keep you indemnified against all claims, damages, costs and losses that may be claimed or awarded against you or that you may suffer resulting from injury or loss to us or to my property or to any property of mine/our invites or licensees or guests.

No membership nomination form will be accepted until all participants have signed this indemnity and completed the details on the nomination form.

The nomination is accepted subject to signature of this indemnity and completion of the details on the nomination form as and when requested by the Alice River Anglers Inc. social fishing club.

ALL MEMBERS MUST SIGN. IF UNDER AGE, PARENT OR GUARDIAN MUST SIGN.

DATE OF SIGNATURE:

ANGLER 1: Name:..... **Signature:**.....

ANGLER 2: Name:..... **Signature:**.....

CHILD 1: Name:..... **Signature:**.....

CHILD 2: Name:..... **Signature:**.....

CHILD 3: Name:..... **Signature:**.....

CHILD 4: Name:..... Signature:.....