



Southland Fly Fishing Club Inc. Membership Application Form

Date: _____

Firstname: _____

Surname: _____

Email Address: _____

Phone Number: _____

Cell phone: _____

Subscription (circle one) **Adult \$30 / Family \$40 / Junior \$10** (under 16 on 1st of July)

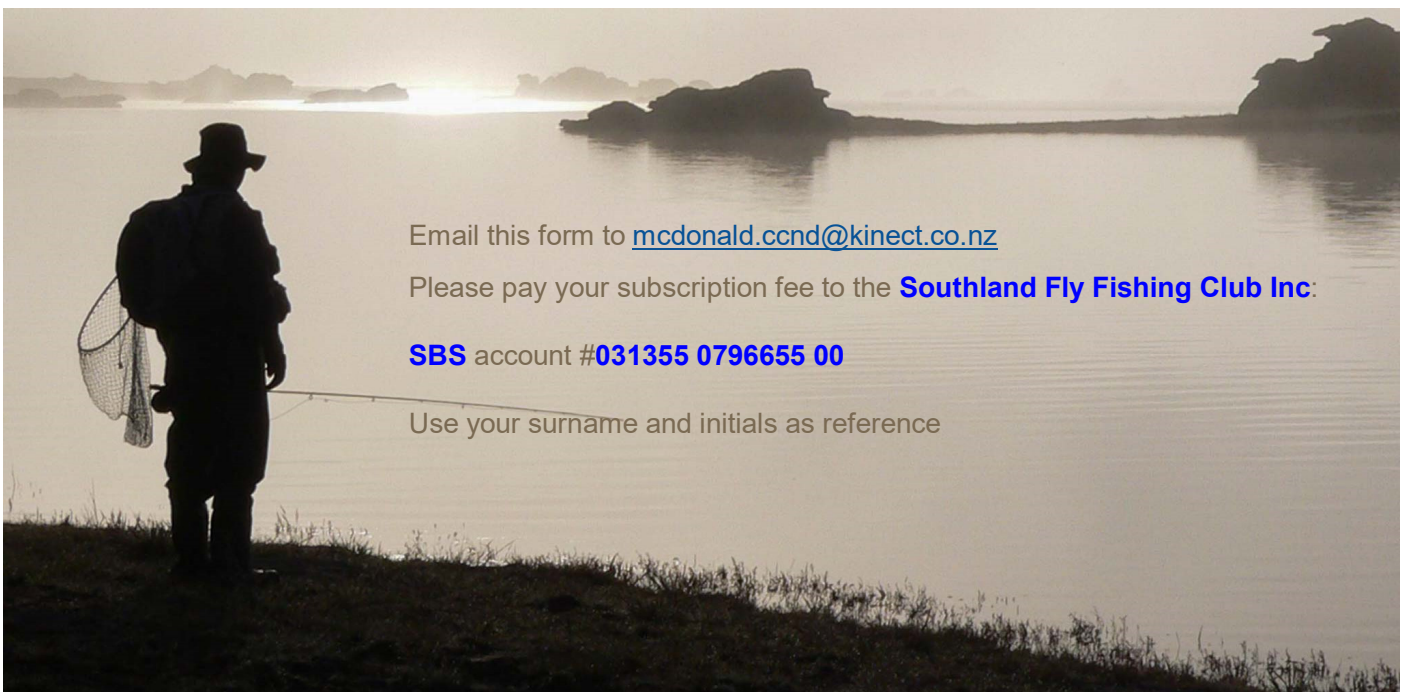
Address: _____

Town/City: _____

Postal Code: _____

Would you like to learn fly tying? _____

What else can we help you with? _____



Email this form to mcdonald.ccnd@kinect.co.nz

Please pay your subscription fee to the **Southland Fly Fishing Club Inc:**

SBS account #**031355 0796655 00**

Use your surname and initials as reference