

Intermediate Consent Form Consents Form

This consent form is required to be completed by the Parent /Guardian or Nominated Adult of any Intermediate Member who wishes to night fish unaccompanied by an adult member on PAAS waters. *On completion of this form a stamp will be issued for your membership*

Membership No:							
Date of Birth:							
Full Name:							
Full Address:							
Postcode:							
Night Fishing Rules.							
 You are required to have be held on record by ou You must have the releving. You must carry with you 	r club Meml ⁄ant "night F	bership Sed F ishing" sta	cretary. amp displaye	ed in your me	embership c	ard.	
I Understand and agree to	o the abov	e rules. (S	ign below)				
I confirm that I am the (P	lease Tick)	Parent	Guardian	Nominated	of the	above-named p	person:
I consent to the above-n Albert Angling Society w consent.	-	_	_				
Consenting Adult Full Na	ne:						
Address:							
Postcode							
Contact Telephone Numb	er						
Consenting Adult Signatu	re						