

Prince Albert Angling Society Postal Application Form

Non-Angling Adult (over 18) Membership

Please complete all applicable areas, or your application may be rejected.

	(Please write over the grey areas below)
Title and First Name (e.g. Mr David)	
Last Name (Surname)	
Address	
Town	
County	
Post Code	
Telephone	
Email	
If applying to accompany an existing member please include their Membership Number here.	
Date of Birth (dd/mm/yyyy)	

Payment

I enclose my payment of £

Send this form along with your **payment payable to PAAS with a stamped self-addressed envelope** (current guidelines for SAE and prices can be found on the Membership page of the website) to:

David Hindle (Membership Secretary)
76 Portree Drive
Holmes Chapel
CREWE
CW4 7JF