

## Corralinn Fly Fishing and Casting Association Inc. Membership Form



Full name (print)				
Full Address (print)				Postcode
Telephone numbers: Home		Mob	oile	
e-Mail Address				*
*The club uses e-mail to notify members email. If you do not wish to receive email	of coming events a ils please indicate y	nd activities. A your wishes her	ll members receive a r e:	monthly newsletter via
Do you agree to your name, spouse's na members and used in Club Newsletters?	-	number, and e	mail address being pr	ovided to other Club
Do you agree to your name and photo be	eing used on the Cli	ub Web Page?	Yes No	
Optional information:				
Date of Birth:			lame:	
OccupationOther skills or hobbies:				
Your fly fishing skill level:	Beginner	Novice	Intermediate	Competent
Are you willing to help with (chec	k all that apply)	:		
Mentoring new members Social Functions Club Library Casting Instruction Other (please specify)		Outings Club Fundraising activities Fly Tying Instruction Monthly Raffle		
I wish to apply for membership of Corra terms and conditions set forth in the con no responsibility for injuries or losses in Signature:	nstitution, by-laws as acurred while using	nd regulation o club equipmen	of the CFFCA and und t or participating in cl	lerstand that CFFCA accepts lub activities.
	Membership	Foos		
Membership commences from 1st Ju	-	rees		
Individual –\$ 30 per year 8 Pro-rata Youth under 16 \$10 per year 8 Pro- A posted paper copy of the Club Nev	rates apply for joining -rata rates also apply			
Please make cheques payable to Cor Club Meetings held on the second W East Launceston.				
	The Secretary Corralinn Fly Fishing and Casting Association Inc. 3/45 Newstead Crescent, Newstead. 7250 Australia			
For more information, visit us online <a href="mailto:cffcasecretary@yahoo.com.au">cffcasecretary@yahoo.com.au</a>	e at: http://www.a	ngelfire.com/	ma/coralinnfishing	Or email the secretary at
Office Use Only				
Membership database updated		Mem	nbership Card Issue	ed 🖵
Receipt Issued				