The Leicestershire Wildfowlers' Association

these documents and payment will not be considered.

Membership Secretary: Mr Martin Green e mail mdgreen76@btinternet.com

FOUNDED IN 1957



APPLICATION FOR MEMBERSHIP

I wish to become a member of the Leicestershire Wildfowlers Association and understand that I am bound by the rules and byelaws of the Association.

I have read the extracts from the rules and am willing to undergo a brief assessment of my ability to safely handle a gun if

requested to do so. NAME:..... ADDRESS:.... POSTCODE: PHONE NUMBER: MOBILE NUMBER: E-MAIL ADDRESS: TYPE OF MEMBERSHIP: **FULL ADULT** D.O.B: **JUNIOR UP TO 18 YEARS OLD JUNIOR 18 TO 21 YEARS OLD** SIGNATURE: Date: NAME OF PROPOSER: Where no proposer is stated you will need to attend a monthly meeting to be approved for membership. **EXPERIENCE:** Please give details of any previous shooting activities If you have any of the following please enter the details, BASC membership number: Shotgun certificate number: Firearms certificate number: Please indicate which of the following categories are of interest to you Wildfowling Conservation ____ Pigeon shooting Gun Dogs **Angling Ferreting** Please send this application form, signed risk assessment form and payment to the Membership Secretary. Applications without

AFFILIATED TO; B.A.S.C., C.A., THE ATLANTIC SALMON TRUST, GAME & WILDLIFE CONSERVATION TRUST & THE SALMON AND TROUT ASS.