



Shellharbour Game Fishing Club Inc.  
(Incorporated under the Association Incorporation Act 1984)

**Application for Membership**

President: Steve Lamond  
Vice President: Trevor Lillico  
Secretary: Carol Goodger  
Treasurer: Mark Coles

Phone: 0417 402243  
Phone: 0404 107655  
Phone: 0423 252279  
Phone: 0432 072259

I, ..... Occupation.....  
(Full Name of Applicant)

Of .....  
(Address)

Phone: (.....) ..... Mobile: ..... Date of Birth: ...../...../.....  
(Juniors Only) Under 16 years of age

Hereby apply to become a member / renew my membership of the above mentioned Incorporated Association. In the event of my admission as a member, I agree to be bound by the rules of the association being in force at the time.

Signature of Applicant: ..... Date: ...../...../.....

**Fees:** Senior Renewal - \$100.00

Juniors (under 16 years of age) & Small Fry (under 11 years of age) **No Fee**

\*\*\*\* **NEW Membership - \$100.00** \*\*\*\*

\*\*\*\* **Temporary Membership - \$70.00** \*\*\*\*

Temporary membership allows a person to fish either, 2 consecutive days, or at a tournament, which covers one, weekend only. If a temporary member wishes to join the club, the remainder of the fee is to be paid in FULL totaling the outstanding amounts as mentioned above.

“**End of Season**” membership is also available for a NEW member joining on or after **the last weekend in April**, which will carry through to the next season. Temporary members fishing at the end of the season can also upgrade to full membership during this time, which will carry through to the next season. **Temporary Members are not eligible for perpetual trophies unless FULL membership is paid by the end of the season.**

Email Address: .....

I check my Email: Daily  Weekly  Fortnightly

I give permission for my details to be available on our website, including contact details: YES  NO

I will access club news via the website:

I am a Boat Owner: YES/NO  (If YES, please complete Boat Registration Form)

**The following to be completed for “New Membership” Applicants Only**

I, ..... , A full member of the Association, nominate the above  
(Full Name) applicant who is known to me, for membership of the Association.

Signature of Proposer: ..... Date: ...../...../.....

I, ..... , A full member of the Association, second the above  
(Full Name of Applicant) applicant who is known to me, for membership of the Association.

Signature of Seconder: ..... Date: ...../...../.....