Montrose And District Wildfowlers Association

Affiliated to the BASC



**MEMBERSHIP APPLICATION FORM**

|  |  |
| --- | --- |
| **Name:** | **Phone No:** |
| **Address:**  | **Mobile:** |
| **DOB:** | **Email:** |
| **Shotgun Cert. No:** | **Issuing Authority:** |
| **If you currently hold or have held a permit for wildfowling on Montrose Basin in the past? please state for how many seasons:**  |  |
| **Have you ever been a member of WAGBI or BASC?** |  |
| **Are you currently a paid-up member of BASC?****If Yes State membership number and expiry date** |  |
| **Have you ever been expelled from or refused admission to any sporting organisation YES/NO?** |  |
| **Please briefly state your shooting experience:** |
|  |
| **Give names of any club members who are personal acquaintances:** |
|  |

**Signature of applicant**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By inserting your name or signature in the above you are confirming that all information provided is true to best of your knowledge.

Please return this form to the Secretary or to any Committee Member together with membership fee of

£\_\_\_\_\_\_\_\_\_ (refunded if application is rejected) (Full & Associate \* Junior under 18yrs £10.00)

**Please leave clear for official use.**

Cheque/Cash received\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date application received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date discussed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date applicant notified \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date BASC notified \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**‘\*** includes BASC and MDWA membership and WHT stamp, but excludes Basin permit costs

To maintain the good reputation of the MDWA it is important that a high level of sporting etiquette and responsibility can be expected from all members and associate members. The club reserve the right to refuse membership on grounds of insufficient references or for any other reason.