

Scottish Anglers National Association Ltd

The National Game Angling Centre, The Pier, Loch Leven, Kinross KY13 8UF

Telephone: 01577 861116 Company Limited by Guarantee Reg. Number SC 295257 Recognised by **SportS**cotland as the Governing Body for the Sport of Game Fishing in Scotland



2017 MEMBERSHIP APPLICATION FORM (please return before 31st May)

Subscription Fees (Approved as a 'minimum amount' by members at AGM)																
CLUB MEMBERSHIP													£75	£75.00		
Individual Members												£20	£20.00			
PROFESSIONAL (COACHES/INSTRUCTORS) & ASSOCIATE MEMBERS (FISHERIES/SHOPS ETC.)												.) £30	£30.00			
JUNIOR MEMBERS (UNDER 18 YEARS OLD BY 1ST MAY, 2017)											FRE	FREE				
Simplify the annual application by setting up a Standing Order DONATION										ı £	£					
Information is held on file according to the Data Protection Act, details from SANA.											τ£	£				
PAYMENT: By Cheque to 'SANA Limited', or Debit/Credit Card												For O	For Office Use On			
(Access/MasterCard/Visa/Maestro) please insert the 16 digit Number (or more) below											Date Retu	ate Returned				
Expiry Date: / Start Date: / Issue No:(if any) 3 digit Security No:											Fee Pai	Fee Paid £				
Signature of Card Holder:											New Mem	ber				
										Cheque I	No.					
						1		Τ				<u> </u>			1	
INDIVIDUAL/PROFESSIONAL/ ASSOCIATE OR JUNIOR MEMBERS Individual Members automatically receive Public Liability Insurance: SGAIC & UKCC Licensed Instructors/Coaches receive Public Liability and Professional Indemnity cover: Associate and Club Members should apply separately.																
Name:																
Address: (Please circle if you are the following: "I am a Coach / Instructor")															ctor")	
Postcode:																
Telephone Home: Work Telephone:																
Email address: Date of Birth (if under 18 years): / /																
CLUB MEMBERS	Details	Details (please include as much information as possible) Star								Stati	Statistical Section			Membe	ers	
Club Name:										Men:						
Name of Club Secretary:	of Club Secretary:									Women	:					
Address of Secretary:								Juniors (u18):								
	Books day 5										-	Disabled	_			
Tal: Hama/Wark/Mahila	Postcode: Ethnic										Minority TOTAL:	_				
Tel: Home/Work/Mobile Email address (if preferred means of communication):										IUIAL	-					
Secretaries Please Note: A requirement for Sport Governing Bodies with Affili Clubs, is to ensure that all Clubs are in agreement and will abide by the Governing Body's Child Protection Policy and Code and in order to be affiliated, Clubs at these by signing this application form below.								with ction	POLICY AND CODE OF CONDICT CAN BE				Hard cop may also btained t the SAN Office	be from NA		
Child Protection Officer:-	Name:	Name:									Tel:					
Official's Signature	X Please	sign he	re:-													

Please complete where applicable, <u>sign above</u> and return with your cheque, Standing Order or card details to the SANA office.

Occasionally, SANA is asked to supply addresses to 'like-minded' angling organisations. Please mark with a cross if you wish your details to be forwarded.

