



GARDEN ISLAND FISHING & AQUATIC ASSOCIATION (INC)
MEMBERSHIP APPLICATION FORM

First Name Surname

Address

City/Suburb Postcode

Phone No. Mobile/Alternative No.

Email Address

* Proposer's Name SIGNATURE.....

* Seconder's Name SIGNATURE.....

*** MUST BE A FINANCIAL MEMBER OF GIFAA.**

APPLICANT'S SIGNATURE DATE

BOAT DETAILS

Boat Name Length Draft

Type: Power Boat Yacht (mark applicable) DoT Registration No

Insurance Company Policy No.

**Do not send any monies until you have been notified
that you have been accepted as a new member.**

Post this form to GIFAA, PO Box 630, Melville, WA, 6956 or email to secretary@gifaa.com.au