Title

DROITWICH SPA ANGLING CLUB 2026

Full Name

MEMBERSHIP APPLICATION FORM

Please complete this form in BLOCK CAPITALS and return to the MEMBERSHIP SECRETARY.

Address									
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Postco	de				D.O.B.				
Telephone					Mobile				
Email									
DSAC No		New member							
Full	£40	Sei	nior	£35		Junior	£10	Please tick	
Enviro	nment /	Agency Lic	ence	e Nur	nber (Co	mpulso	rv):		
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Birmingham AA Number (Optional):									
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The me	mbersh	ip fee is to	o be	paid	directly	into the	DSAA (Club bank	
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Refere	nce – Yo	ur Surnar	ne a	nd In	itials				
After n	naking t	he BACS p	aym	nent,	please s	end a co	nfirmat	tion email to	
the Me	mbersh	ip secreta	ry: j	enpe	g1@gma	ail.com			
I will al	oide by I	Droitwich	Spa	AC R	ules, Si	gned:			
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