



AUSTRALIAN RECREATIONAL  
FISHING FOUNDATION

## Membership Application Form

### Full Member / Associate Member

(please circle)

I \_\_\_\_\_ (Full name)  
Of the \_\_\_\_\_ (Organisation Representing if any)

Wish to be considered as a Member of the Australian Recreational Fishing Foundation (ARFF)

Signed \_\_\_\_\_

Date \_\_\_\_\_

The information requested below will be kept confidential but relevant information will be submitted to ASIC in line with ASIC regulations

Registered Company

Name \_\_\_\_\_

Registered Address \_\_\_\_\_

Postal Address \_\_\_\_\_

ABN \_\_\_\_\_

Primary Contact \_\_\_\_\_

Telephone/Mobile \_\_\_\_\_

Secondary Contact \_\_\_\_\_

Telephone/Mobile \_\_\_\_\_

Disclosure \_\_\_\_\_

(Is the company you represent a member of any other representative bodies, if so please provide the company names)

The following information is for ARFF Company Records

I represent \_\_\_\_\_ individual people of the recreational fishing community  
(Please enter the number of members in your organisation)

I represent \_\_\_\_\_ organisations within Australia  
(Please enter the number of organisations that are members of the organisation you represent)

By signing the application form I agree to abide by the ARFF Constitution (copy of the current Constitution is attached for information)

Please forward your completed application form to: [enquiries@recreationalfishing.com.au](mailto:enquiries@recreationalfishing.com.au)