

# **DEVIZES ANGLING ASSOCIATION**

## **APPLICATION FOR NIGHT PERMIT**

For Season(*insert season date*).....

PERMIT FEE £10.00 (TO INCLUDE ADULTS & JUNIORS)

APPLICANTS NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

POST CODE \_\_\_\_\_ TEL NO \_\_\_\_\_

DEVIZES A A MEMBERSHIP NO \_\_\_\_\_

APPLICANTS MUST SUPPLY 2 PASSPORT SIZE PHOTOS.

ON COMPLETION SEND THIS APPLICATION  
FORM DIRECT TO THE SECRETARY

PLEASE MAKE CHEQUES PAYABLE TO DEVIZES ANGLING  
ASSOCIATION PLEASE ENCLOSE S.A.E. FOR RETURN OF PERMIT

ALL ENQUIRIES TO: [danny.williamson824@btinternet.com](mailto:danny.williamson824@btinternet.com)

OR VISIT OUR WEB SITE @ [devizesaa.org.uk](http://devizesaa.org.uk)