



**NATIONAL FEDERATION OF FISHERMEN'S ORGANISATIONS**

**INDIVIDUAL MEMBERSHIP APPLICATION FORM**

PLEASE PRINT

Vessel Name: ..... Reg. No: .....

Home Port: .....

Vessel Owner's Name: .....

Vessel Owner's Address: .....

..... Post code: .....

Vessel Owner's Tel: Landline: ..... Mobile: .....

Vessel Owner's E-mail: ..... Fax: .....

Vessel Tel. No: ..... Vessel Sat Tel: .....

Vessel Sat C No. ....

Skipper's Name (if different): .....

<u>Vessel/Fishing Details</u>						
Overall Length: ..... mtrs; Breadth ..... mtrs; Kilowatts .....						
Vessel Capacity Units: .....						
Vessel Type: (tick all that apply)	Beamer	<input type="checkbox"/>	Dredger	<input type="checkbox"/>	Long Lines	<input type="checkbox"/>
	Netter	<input type="checkbox"/>	Potter	<input type="checkbox"/>	Seiner	<input type="checkbox"/>
	Trawler	<input type="checkbox"/>				
	Other (state)	.....				
Fishing Type: (tick all that apply)	Pelagic	<input type="checkbox"/>	Whitefish	<input type="checkbox"/>	Flatfish	<input type="checkbox"/>
	Skate/Ray	<input type="checkbox"/>	Salmon	<input type="checkbox"/>	Bass	<input type="checkbox"/>
	Prawns	<input type="checkbox"/>	Shrimps	<input type="checkbox"/>	Scallop	<input type="checkbox"/>
	Crab/Lobster	<input type="checkbox"/>	Whelk	<input type="checkbox"/>	Bivalves	<input type="checkbox"/>
	Other (state)	.....				

Local Association Membership: .....

I hereby agree to abide by the rules and constitution of the National Federation of Fishermen's Organisations.

Signature: ..... Date: .....

Name: .....

*Subscription Details: £1.15 per vessel capacity unit (VCU) + V.A.T.  
Membership Period: January – December  
Please do not send payment with this application form. You will be invoiced at a later date.*

Please return to:

NFFO Offices, 30 Monkgate, York, YO31 7PF Tel: 01904 635430  
Website: www.nffo.org.uk Email: nffo@nffo.org.uk Fax: 01904 635431