THE ALBERTA FISH & GAME ASSOCIATION

MEMBERSHIP ROSTER YEAR: 2017

CLUB NAME & NUMBER: DATE:

EXPIRY DATE **MTH/DD/YR**	R//F/ D/Y	AFGA NUMBER	SURNAME	FIRST NAME	ADDRESS	TOWN CITY	P/C	PHONE NO. & AREA CODE	**M/ F**	BIRTH YR	E-MAIL ADDRESS (IF AVAILAABLE FOR NEWS RELEASES, ETC.)

PLEASE MAKE SURE YOUR CLUB NAME AND CODE NUMBER IS ON ALL PAPERWORK SENT INTO THE HEAD OFFICE