



Australian National Sportfishing Association Queensland Branch Inc

PO Box 198
Lawnton, Qld 4501

Website: www.ansaqld.com.au



Club: _____

Name: _____

Contact Details: Phone: _____

E-mail: _____

Representation Status: Sponsored Delegate Delegate Visitor

Sponsor club: _____ (If Sponsored Proxy Delegate)

Stay Duration: Thursday Afternoon to Sunday Morning

Friday Morning to Sunday Morning

Friday Evening to Sunday Morning

Day Visitor: Saturday

Sunday

Other: _____

Attending Field Workshop: Yes No

Accommodation Preferences:

The Lodge 3 Star Shared Accommodation

3 Star Family Units

4 Star Deluxe Units

Studio Cabins

Family Cabins

Have you arranged to share accommodation with other attendee's?

1. _____

2. _____

3. _____

If you are sharing as a Family, list names of family members below:

1. _____ Adult Child Age of Child _____

2. _____ Adult Child Age of Child _____

3. _____ Adult Child Age of Child _____

4. _____ Adult Child Age of Child _____

Availability of accommodation can be confirmed by contacting the ANSA Qld Treasurer below.