



# PEDSAC Competition Nomination

Name and Surname: \_\_\_\_\_

Age: \_\_\_\_\_ Are you medically fit to compete: 

Y	N
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Competition nominating for: \_\_\_\_\_

Hosting Venue: \_\_\_\_\_

Date of competition: \_\_\_\_\_

Have you previously fished from this venue?: 

Y	N
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Brief record of good catches over the last 2 years.

<u>Date</u>	<u>Fish Caught</u>	<u>Line class</u>	<u>Where / Area</u>	<u>Weight</u>

Signature of Nominee: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_.

### FOR OFFICE USE

Competitions Officer Acceptance: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Chairman's Acceptance: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_