

Participant Registration

Event Name:

Venue:

Date: _ _ / _ _ / _ _

First Name:
Surname:
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>
Date of Birth:
Email:
Tel. Number:
Address:
Postcode:
I consent for the Angling Trust & Environment Agency to contact me* Please tick <input type="checkbox"/>
Media Policy: Available and has been explained Please tick <input type="checkbox"/>
Are you registered disabled? Yes <input type="checkbox"/> No <input type="checkbox"/>
How did you hear about the event?
Have you been fishing before? Yes <input type="checkbox"/> No <input type="checkbox"/>

*You may be contacted by the Angling Trust via email, text (SMS) or post with further information on other fishing events, advice and guidance on going fishing, and details on how to purchase a fishing licence. We may also contact a small number of participants by phone to discuss their experience of angling. Your data may be shared with the Environment Agency who assist us in delivering angling participation. Please refer to our Data Protection Privacy Notice for further details.