

**COLCHESTER PISCATORIAL SOCIETY SPECIMEN FISH REGISTRATION FORM**

DATE

WATER

FISH

WEIGHT

MEMBERS NAME

MEMBERSHIP NUMBER

WITNESSED BY NAME

WITNESSED BY ADDRESS

WITNESSED BY SIGNATURE

PHOTO TAKEN

PLEASE RETURN THIS FORM TO: THE SECRETARY B.TOOK 18 SONGERS COTTAGES DEDHAM RD BOXTED CO4 5SQ

PLEASE SEND YOUR PHOTO BY ATTACHING IT TO AN EMAIL ADDRESSED TO: [shauncps@cpsangling.com](mailto:shauncps@cpsangling.com)