09.2017

ORI FISH TAGGING PROJECT

APPLICATION FORM

**PLEASE COMPLETE THIS FORM CAREFULLY AND EMAIL IT TO US:** [**oritag@ori.org.za**](mailto:oritag@ori.org.za)

**SURNAME:**  **FIRST NAME:**

**ID Number:**

**RESIDENTIAL ADDRESS:**

**POSTAL ADDRESS:**

**CODE:**

**WORK PHONE:** **CELL**:  **HOME:**

**FAX:** **EMAIL:**

**ANGLING CLUB (IF ANY):**

**MAIN AREA FISHED IN SOUTH AFRICA:**

**APPROXIMATE NUMBER OF FISHING OUTINGS PER YEAR:**

**DO YOU FISH MAINLY IN COMPETITIONS? YES NO**

**WHAT ARE THE MAIN FISH SPECIES YOU WISH TO TAG? (PLEASE NAME):**

**FOR SALT WATER FISH TAGGING IN SOUTH AFRICA**

**PLEASE TICK ONLY ONE BLOCK, MOST APPROPRIATE FOR YOUR IMMEDIATE REQUIREMENT**

**(1) SMALL TAGS: FOR SMALLER FISH 30-60 CM FORK LENGTH, NOT SHARKS: (D-Tag)**

**(2) LARGE TAGS: FOR LARGE FISH > 60 CM (INCLUDING SHARKS & STINGRAYS): (A-Tag)**

**(3) LARGE STEELHEAD TAGS: FOR MARLIN & SAILFISH: (M-Tag)**

**DO YOU FISH FROM A BOAT?** **YES NO**

**DO YOU OWN YOUR OWN BOAT? YES NO IF YES STATE:**

**BOAT NAME:** **REGISRATION NO:**

**GIVE A BRIEF MOTIVATION WHY YOU WISH TO JOIN THE ORI TAGGING PROJECT?**

**SIGNATURE:**

PLEASE RETURN THIS FORM TO ORI

EMAIL: [oritag@ori.org.za](mailto:oritag@ori.org.za)