Test Valley Angling Club &	Test Valley Angling Club &
Southampton Piscatorial Society	Southampton Piscatorial Society
SPECIMEN FISH Weight Certificate	SPECIMEN FISH Weight Certificate
VENUE (Location)	VENUE (Location)
MEMBERS NAME PRINT NAME (as it appears on your warrant)	MEMBERS NAME PRINT NAME (as it appears on your warrant)
PHONE NUMBER	PHONE NUMBER
WARRANT No (5 DIGIT)	WARRANT No (5 DIGIT)
DATE CAUGHT// 20	
SPECIES WEIGHT SIGNATURE OF MEMBER (pounds/kilo's)	SPECIES WEIGHT (pounds/kilo's)
SIGNATURE OF MEMBER (pounds/kilo's)	SIGNATURE OF MEMBER (pounds/kilo's)
WITNESS INFORMATION	WITNESS INFORMATION
1st WITNESS NAME PRINT NAME	1st WITNESS NAME PRINT NAME
WARRANT No (5 DIGIT)	WARRANT No(5 DIGIT)
If not a member, ADDRESS	If not a member, ADDRESS
PHONE NUMBER	PHONE NUMBER
SIGNATURE OF WITNESS	SIGNATURE OF WITNESS
2nd WITNESS NAME PRINT NAME	2nd WITNESS NAME PRINT NAME
WARRANT No (5 DIGIT)	WARRANT No (5 DIGIT)
If not a member, ADDRESS	If not a member, ADDRESS
PHONE NUMBER	PHONE NUMBER
SIGNATURE OF WITNESS	SIGNATURE OF WITNESS
SPECIMEN FISH Weight Certificate  VENUE	SPECIMEN FISH Weight Certificate  VENUE
WITNESS INFORMATION	WITNESS INFORMATION
1st WITNESS NAME PRINT NAME	1st WITNESS NAME PRINT NAME
WARRANT No(5 DIGIT)	WARRANT No(5 DIGIT)
If not a member, ADDRESS	If not a member, ADDRESS
PHONE NUMBER	PHONE NUMBER
SIGNATURE OF WITNESS	SIGNATURE OF WITNESS
2nd WITNESS NAME PRINT NAME	2nd WITNESS NAME PRINT NAME
WARRANT No (5 DIGIT)	WARRANT No (5 DIGIT)
If not a member, ADDRESS	If not a member, ADDRESS
PHONE NUMBER	PHONE NUMBER
SIGNATURE OF WITNESS	SIGNATURE OF WITNESS