



CITY OF PORT ALBERNI

4850 ARGYLE STREET, PORT ALBERNI, BC V9Y 2V8 (250) 723-2146

BAINBRIDGE LAKE FISHING PERMIT

Name: _____ Age: _____

Address: _____

The person named hereon, whose signature appears below, is hereby permitted to fish in Bainbridge Lake.

THIS PERMIT EXPIRES DECEMBER 31, 20 ____ .

HEIGHT: _____

WEIGHT: _____

EYE COLOUR: _____

HAIR COLOUR: _____

I hereby undertake to abide by all regulations established by the City of Port Alberni.

Signature of Permit Holder

Issued by: _____
For Russell Dyson, City Clerk

Date: _____