



# MEMBERSHIP FORM

Application / Aansoek

Renewal / Hernuwing

Hiermee doen ek/ons aansoek om lidmaatskap van u klub en onderneem om die bepalings van u klub se konstitusie en reëls wat van tyd tot tyd neergelê mag word, na te kom.

I/We hereby apply for membership to the club and undertake to abide by the constitution and bylaws as laid down from time to time.

Naam/Name: \_\_\_\_\_

Adres/Address: \_\_\_\_\_

Poskode/Postal Code: \_\_\_\_\_

Telephone Number (Home): \_\_\_\_\_

Telephone Number (Work): \_\_\_\_\_

Cell Number: \_\_\_\_\_

Email: \_\_\_\_\_

Your birthday: \_\_\_\_\_

## LEDEGELD/MEMBERSHIP FEES

|                |                      | Cheque                   | EFT                      | Cash                     |
|----------------|----------------------|--------------------------|--------------------------|--------------------------|
| Enkel/Single:  | R70.00 per jaar/year | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Dubbel/Double: | R90.00 per jaar/year | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Bankbesonderhede/Banking Details: ABSA  
Branch Code 632 005  
Account Number: 039 018 2546

(Let asseblief daarop dat bewys van betaling hierdie vorm MOET vergesel)

(Please note that proof of payment MUST accompany this form)

Ek/Ons vertrou dat hierdie aansoek aanvaar sal word. I/We trust that this application will be accepted.

\_\_\_\_\_  
Geteken/Signature

\_\_\_\_\_  
Datum/Date

Hoe het u van die klub verneem?

How did u hear about the club? \_\_\_\_\_

Please complete and forward together with proof of payment to either of the addresses below.

**WCSBTC, P O Box 3575, Tyger Valley, 7536**

**CELL 078 4329454**

**FAX:0866247060**

[staffieclub@gmail.com](mailto:staffieclub@gmail.com)

[www.staffieclub.co.za](http://www.staffieclub.co.za)