

# SOUTH AFRICAN FIGURE SKATING ASSOCIATION MEMBERSHIP APPLICATION FORM



## APPLICANTS DETAILS

**SURNAME:**

**FIRST NAME(S):**

**ADDRESS:**

**POSTAL CODE:**

**TELEPHONE:** **CODE:**         **NO:**   -

**CELL:** **NO:**

**E-MAIL:**

**OCCUPATION:**

**IDENTITY NO:**

**DATE OF BIRTH:**

**COACH'S NAME (IF APPLICABLE):**

**APPLICATION TO PROVINCE:**

IF APPLICANT IS OVER THE AGE OF 18:

	PROPOSER	SAFSA NO.	SECONDER	SAFSA NO.
<b>SURNAME:</b>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
<b>SIGNATURE:</b>	<input style="width: 100%; height: 40px;" type="text"/>		<input style="width: 100%; height: 40px;" type="text"/>	
<b>DATE:</b>	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>		

### DECLARATION

I AGREE TO ABIDE TO THE CONSTITUTION AND RULES AND REGULATIONS OF THE SOUTH AFRICAN FIGURE SKATING ASSOCIATION AND ANY SUB-COMMITTEE THEREOF AND UNDERSTAND THAT FAILURE TO COMPLY WITH THE CONSTITUTION AND RULES AND REGULATIONS MAY RESULT IN DISCIPLINARY ACTION AND/OR MY EXPULSION FROM THE SOUTH AFRICAN FIGURE SKATING ASSOCIATION.

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<b>APPLICANTS SIGNATURE</b>	<b>DATE</b>	<b>MEMBERSHIP FEE ENCLOSED</b>
(IF UNDER 18 YEARS OF AGE, PARENT OR GUARDIAN MUST SIGN)		(CHEQUE, POSTAL ORDER, CASH)

Please note: A copy of the applicants birth certificate or identity document must accompany the application.

FOR OFFICE USE ONLY											
<b>MEMBERSHIP</b>	APPROVED	<input style="width: 20px; height: 20px;" type="checkbox"/>	REJECTED	<input style="width: 20px; height: 20px;" type="checkbox"/>	<b>SAFSA MEMBERSHIP NUMBER:</b>						
<b>DATE:</b>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>
<b>PROVINCIAL COMMITTEE:</b>		<input style="width: 100%; height: 20px;" type="text"/>									
<b>PROVINCIAL SECRETARY:</b>		<input style="width: 100%; height: 20px;" type="text"/>									