



APPLICATION FOR 2024 MEMBERSHIP (MEMBERS DETAILS TO BE FILLED IN PLEASE)

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PERSONAL DETAILS					
DATE:					
SURNAME:					
FIRST NAMES:					
TITLE: <i>(please circle/shade)</i>	MR	MRS	MS	MISS	MASTER
<i>(please circle/shade)</i>	MALE			FEMALE	
DATE OF BIRTH:		AGE at 01/01/2024			
IDENTITY NUMBER:					
PHYSICAL ADDRESS:					
			CODE		
EMAIL ADDRESS					
CELL NO:					
OCCUPATION:					
YEAR THAT YOU JOINED BOKSBURG ATHLETIC CLUB:					
<i>(This applies to continuous membership at the club, if you have broken membership and re-joined then you have to state the year that you re-joined)</i>					
IF YOU ARE A SCHOLAR					
SCHOOL:				GRADE	
WHO IS YOUR BAC COACH:					
2023 LICENSE NO: <i>(If applicable)</i>					
CHAMPIONCHIP NO:					
EMERGENCY CONTACT DETAILS					
NEXT OF KIN: <i>(Please state full names)</i>					
EMERGENCY CONTACT NOs:					
EMAIL ADDRESS:					
FOR OFFICE USE ONLY					
MEMBERSHIP NO:		2024 LICENSE NO ISSUED:			

HEREBY APPLY FOR MEMBERSHIP AND DECLARE THAT I AM AN AMATEUR ACCORDING TO THE DEFINITION LAID DOWN BY ATHLETICS SOUTH AFRICA.

SIGNATURE OF APPLICANT:

SIGNATURE OF PARENT:

(If Athlete is Under 18)

IN THE EVENT OF NEW MEMBERS TRANSFERRING FROM ANOTHER CLUB

PREVIOUS CLUB: _____

CLEARANCE LETTER RECEIVED: _____