



www.saftaa.co.za

## SAFTAA Affiliation Form: 2019

**First names:** .....

**Surname:** .....

**ID number:** .....

**Gender:**  M  F

**Mail address:** .....  
.....

**Physical address:** .....  
.....

**Email address:** .....

**Telephone:** .....

**Cell phone:** .....

**Club:** .....

**New member:**  Y  N

**Renewal – Current/last SAFTAA number:** SA .....

Affiliation period 1<sup>st</sup> January 2019 to 31<sup>st</sup> December 2019.

Affiliation fee 2018: R600 (R275 per additional family member living at same address or scholars/permanent students).

**If payment is done before 31st Dec 2018 then the 2018 fees will be applicable. R550 & R250 respectively**

**I hereby agree to abide by the SAFTAA Constitution, Rules and Code of Conduct**

Signed ..... Date .....

SAFTAA savings bank account details: Standard Bank Gezina, PRETORIA.

Account No.: 414 057 287

Branch Code: 014845

**This form, duly completed, must please be submitted to SAFTAA by your Club Secretary**