

BOKSBURG CAMERA CLUB

APPLICATION FOR MEMBERSHIP

Date of Application:

Title: Initial: Surname:
Full Name(s):
Identity Number:

Address:

Postal	Physical
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
Code: <input type="text"/>	Code: <input type="text"/>

Contact Number:
Home: Cell: Fax:
e-mail:

Occupation:
Employer:

Please state if you have any disabilities or illnesses that we need to be made aware of:

Contact Number: (In Case of Emergency)
Name: Number:
Name: Number:

The above mentioned member is herewith to be admitted as a member of the
BOKSBURG CAMERA CLUB
as from _____ and agrees to abide by the rules and conditions of
the club, as laid down from time to time in the Constitution.

if you are a member of any other Photographic Club, do you wish to nominate **Boksburg Camera Club**
to receive any credits from outside competitions and Salons, etc? Yes No

SIGNATURE: Proposed By:

Bank Details: Boksburg Camera Club Please forward proof of payment to:
Bank: First National Bank deesmith@boksburgcameraclub.onmicrosoft.com
Branch: Sunward Park
Branch Code: 250655
Account No.: 62482721406

Subscription: R550 (including Catering Fee.)