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| RONDEBOSCH SPORTS CLUBRondebosch Oval, 54 Park Road, Rondebosch, 7700, Cape Town | **OFFICIAL USE ONLY** |
| DATE: | PMT REF: |
| MEM. #: | ZAR: |

 Club Manager: +27 (0) 21 612 0285 +27 (0) 82 442 3680 | E-mail: membership@rondeboschsportsclub.co.za

 **HOME OWNER / TENANT MEMBERSHIP APPLICATION FORM**

|  |  |  |  |
| --- | --- | --- | --- |
| FIRST NAME(S): |  | SURNAME: | ADV / DR / MR / MRS / MISS / MS / PROF / REV / ………… **:** |
| GENDER: | Male: Female: | NATIONALITY: |  |
| ID.NO: |  |  |  |  |  |  |  |  |  |  |  |  |  |  | DATE OF BIRTH: | YYYY | MM | DD |
| OCCUPATION: |  |
| RESIDENTIAL ADDRESS: \*\* |  | POSTAL ADDRESS: |  |
|  |  |  |  |  |  |
|  | City | : |  | City: |  |
| Region | : |  | Region: |  |
| Country | : |  | Country: |  |
| Post Code | : |  | Post Code: |  |

\*\* please attach proof of your residential address \*\*\* Family members not living at the above address must complete a separate application

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| --- | --- | --- | --- |
| HOME PHONE: |  | WORK NUMBER: |  |
| CELL NUMBER: |  | FAX NUMBER: |  |
| PRIMARY EMAIL: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ALTERNATIVE EMAIL: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |
| Additional Members: |
| 1 ID Relationship |
| Email Address: |
| 2 ID Relationship |
| Email Address: |
| 3 ID Relationship |
| Email Address: |
| 4 ID Relationship |
| Email Address: |
| Has the candidate any relatives who are already members\* of the club? If yes, please provide full name(s) and relationship: |
| 1. | 2. | 3. |
| Cell No | Cell No | Cell No |
| List other clubs of which the candidate is, or has been a member: | PERIOD ATTENDED: |
| 1. |  |
| 2. |  |

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| Has the candidate ever had an application for membership of any club refused, been requested to resign, been expelled from or suspended by any club? |
| NO or YES (Please attach details) |
| Has he/she ever been convicted of a criminal offence? |
| NO or YES (Please attach details) |
| Has he/she previously been a member\* of RSC and resigned voluntarily? If yes, reason and year of resignation. |
| NO or YES (Please attach details) |

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| **CHECKLIST:** |
| 1. Proposer and Seconder signatures obtained, OR Letter of Motivation/Reference attached |
| 2. Proof of address attached |
| 3. Attached Proof of Payment - via EFT or bank deposit Credit Card payment To be paid on submission of application, in person (Cash, , Credit/Debit Card credit card)Other  |

I hereby certify that the above information is true and correct and that I (have read and understood the RSC Constitution) and acknowledge that I am bound by the rules and regulations of the constitution (copy to be supplied if required)

**APPLICANTS SIGNATURE: DATE:**

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| **FOR OFFICIAL USE ONLY** |
| **Approved by Membership Committee Membership Chairperson Signature:** | **DATE:** |

Banking details:

Name: Marist War Memorial Club

Bank: Standard Bank

Branch: Rondebosch

Branch code: 025009

Account No.: 071 461 493

Account Type: Current

Reference: Your initials and surname