	MEMBERSHI	PAPPLICATION	
	APPLICANT	INFORMATION	
Name:			
Date of birth:	Cell:	Landline:	
Current address:			
City:	Province:	Code:	
	EMPLOYMEN	INFORMATION	
Current employer:			
Employer address:			
Phone:	E-mail:	'	
Position:			
	EMERGEN	CY CONTACT	
Name of a relative not residing	with you:		
Address:		Phone:	
City:	Province:	Code:	
Relationship:	'		
	SPOUSE II	IFORMATION	
Name:			
Date of birth:	Email:	Phone:	
Current employer:	·		
Employer address:			
Phone:	E-mail:		
City:	Province:	Code:	
	OTHER CLUB	MEMBERSHIPS	
Name of club	Type of club		
	СНІ	LDREN	
Name		Age	
Name		Age	
	WHY WOULD YOU LIKE TO	JOIN 4 X 4 ADVENTURE CLUB?	

4 X 4 OFF-ROAD ADVENTURE CLUB

VEHICLE DETAILS			
MAKE:			
MODEL AND YEAR:			
REGISTRATION:			

CONDITIONS:

- Membership fees must be made in full prior to participation
- The indemnity form must be completed prior to participation
- No reckless behavior or driving under the influence of alcohol
- Prospective members need to attend two outings before full acceptance as a member

Prospective members need to attend two outings before juli acceptance as
Bank Details for Membership Payment:
Amount: R395
Bank: FNB
Account Name: 4x4 Offroad Adventure Club
Type of Acc: Current
Account Number: 62619747902
Branch Code: 204709
I agree to the above terms and conditions
Signed: