SAVAGES ATHLETIC CLUB

Application for Membership

Est. 1960

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Licence Number: _____

Title: _____ Surname: _____

First Names: _____ Known as: _____

Identification Document: ID book/card ☐ Birth Certificate ☐ Passport ☐ Refugee Permit ☐

ID Number: _____ Date of Birth: _____

Residential Address: – Domicilium Rule _____

_____ Code: _____

Postal Address: (Tick box if same as res) ☐ _____

_____ Code: _____

Tel: (H) _____ (W) _____ (Cell) _____

Email Address: _____

Occupation: _____ Company: _____

Next of Kin: _____ Relationship : _____

Contact Details of Next of Kin - Cell: _____

Participation as (tick relevant): Athlete ☐ Coach ☐ Technical Official ☐ Office Bearer ☐

Participation in (tick relevant): Road Running ☐ Walking ☐ Cross-Country ☐ Track & Field ☐

Age Category: Junior ☐ Senior ☐ 35 – 39 ☐ 40 – 49 ☐ 50 – 59 ☐ 60 – 69 ☐ 70 + ☐

Other Sporting Interests: _____

Which of our 3 annual Savages events would you, as a member, be willing to assist with?

Evening Inter-Club Time Trial ☐ Saturday Cross-Country ☐ Sunday Savages Race ☐

Were you referred by any Savages member? Yes ☐ No ☐ Name: _____

What made you want to join Savages? _____

Name of previous Athletic Club: _____

I am not a Member of any other Athletic Club, and/or have left my previous Athletic Club in good standing, as per attached Clearance Letter.

I certify that I am an eligible athlete in accordance with the rules of Athletics SA and desire to be registered as an eligible athlete/coach/technical official of Savages Athletic Club. I am not eligible to join any other Athletic Club without a clearance letter from Savages Athletic Club.

I understand that my Savages Membership will automatically renew on 1st January each year. Should I wish to resign, I am required to give a calendar months' notice in writing to the Secretary.

I acknowledge that I have visited the Savages website at **www.savagesac.co.za** and have read the Savages Constitution.

Please complete the Savages Application Form, ASA Licence Application Form and return together with a **copy of your Identity Document and Clearance Letter from previous Athletic Club to** info@savagesac.co.za

An invoice will be emailed to you for payment to finalise your application.

Date: _____ Signature: _____