



APPLICATION FOR MEMBERSHIP

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(please print your name in full) hereby apply for members of the Trails club of South Africa and, if accepted, agree to abide by the Club's Constitution and to uphold the aims and principles contained therein.

I hereby absolve the Club and its members from any liability whatsoever for loss of damage to my person or property whilst engaged in Club activities.

Signature:

Date:

Signature of parent/guardian if under 18:

PERSONAL DETAILS

Occupation: ID no

Home Address: Post Code.....

Postal Address if different from above:..... Post Code.....

Tel: Home Tel Work.....

Cell Phone: Email address:

EMERGENCY CONTACT DETAILS

Name of Next of Kin/close friend/ relative/colleague:.....

Relationship:

Emergency contact number of Next of Kin/close friend/relative/colleague:.....

HIKING

How did you hear about the Club?

Brief details of previous hiking activities:

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MEDICAL

Do you have any serious medical complaint? If yes, please provide brief details.....

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OTHER

Are you prepared to do any of the following? (please mark with an X)

| | | | |
|-----------------------------------|--------------------------|---------------------------|--------------------------|
| Lead hikes | <input type="checkbox"/> | Offer transport to hikes | <input type="checkbox"/> |
| Stand on Committee | <input type="checkbox"/> | Assist with catering | <input type="checkbox"/> |
| Write articles for the newsletter | <input type="checkbox"/> | Offer a venue for socials | <input type="checkbox"/> |

Any other – please specify:

Please complete in full and give back to the hike leader to sign and submit by email to:

trails.club.sa@gmail.com



TCSA website:
<https://www.trailsclub.co.za>

| MEMBERSHIP FEES | | |
|---|-------------|------|
| | R | C |
| Annual Membership (from 1 Jan – 31 Dec) | | |
| Adults: R180 | | |
| Children under 18 years old R100 | | |
| AMOUNT DUE | TOTAL | |
| Banking details: Name of Acc: The Trails Club of South Africa BANK and BRANCH: Standard Bank Claremont (025109) Cheque Account Number: 072528451 | | |
| Please pay the amount due in order to gain Pending Member Status. Email completed form or give to a hike leader. If you have any queries please contact the Membership Secretary. | | |
| FOR COMMITTEE USE ONLY | | |
| PROPOSER: | Print Name: | Sign |
| SECONDER: | Print Name: | Sign |
| CHAIRMAN: | Print Name: | Sign |
| DATE ACCEPTED: | | |
| OTHER INFORMATION | | |
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Please email this form to: Trails.Club.sa@gmail.com