****

PO Box /Posbus 506 Tel: 051 410 0955

Henry St./Str. 118 Fax/Faks: 051 448 4220

BLOEMFONTEIN E-pos/E-mail: braunviehsa@studbook.co.za

9300

**Ras**:/**Breed** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Indien Stoetteling/If Stud Breeding)**

**EK/ONS,/I/WE,**

**1. TITEL:**(meld PROF., DR., MNR., MEV., MEJ., ens.)

 **TITLE:**(indicate PROF., DR., MR., MRS., MISS., etc.) **/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**2.VOORLETTERS:/INITIALS: /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_**/ **(NAAM/NAME)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3. VAN:/SURNAME: /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**4. ID. NOMMER:/ID. NUMBER: /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**5. BTW NR.:/VAT NO.: \_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

 (Heg asseblief ‘n afskrif van die BTW sertifikaat aan./Please attach a copy of the VAT certificate.)

**6. DEELNEMER NAAM:** (indien die deelname nie geregistreer moet word as ‘n individu of onder die aansoeker se van nie)

 **PARTICIPANT NAME:** (if not to be registered under the surname of the applicant or as an individual)

 **/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

 **ADRES VAN AANSOEKER:/ADDRESS OF APPLICANT:**

**7. /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**8. /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**9. /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**10. POSKODE:** **PROVINSIE:**

 **POSTAL CODE: /\_\_\_/\_\_\_/\_\_\_/\_\_\_/ PROVINCE:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_**\_\_\_\_\_\_\_\_\_\_**

 **DISTRIK: STREEK:**

 **DISTRICT:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **REGION:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **TEGNIESE ADVISEUR:**

 **TECHNICAL ADVISOR:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **TELEFOON NOMMER:**

 **TELEPHONE NUMBER:** (**\_\_\_\_\_\_\_\_\_**) (**\_\_\_\_\_\_**\_\_\_\_**\_\_\_\_\_\_\_\_\_\_**)

 **FAKS:**  **SEL:**

 **FAX:**  (\_\_\_\_\_\_\_)(\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) **CELL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**11. E-POS ADRES:**

 **E-MAIL ADDRESS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**12. TAAL:**(waarin korrespondensie verlang word):

 **LANGUAGE:**(in which correspondance is required) **AFRIKAANS /\_\_\_/** **ENGELS/ENGLISH /\_\_\_/**

**DOEN HIERMEE AANSOEK OM DEELNAME AAN DIE VOLGENDE AANTEKENINGDIENSTE VAN SA STAMBOEK/**

**DO HEREBY APPLY FOR PARTICIPATION IN THE FOLLOWING RECORDING SERVICES RENDERED BY SA STUD BOOK**

**Registrasie-aantekening (Stoetteling)**

**Registration recording (Stud breeding)**

**Produksie-aantekening: Vleis**

**Production recording: Beef**

**13. DEELNAME WORD VERLANG VANAF** **D D M M C C Y Y**

 **PARTICIPATION REQUIRED AS FROM** **/\_\_\_/\_\_\_/ /\_\_\_/\_\_\_/ /\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**14. TIPE DEELNAME:/TYPE OF PARTICIPATION:**

/ 1 / INDIVIDUELE DEELNEMER/INDIVIDUAL PARTICIPANT

/ 2 / VENNOOTSKAP/PARTNERSHIP:\* Aantal vennote:/Number of partners: /\_\_/\_\_/

/ 3 / MAATSKAPPY/COMPANY #

/ 4 / REGSPERSOONLIKHEIDSLIGGAAM/BODY CORPORATE #\*

/ 5 / TRUST #\*

 # Registrasie nr**.:/**Registration no.: **/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

/ 3 / Heg die volgende aan:/Attatch the following:

1. Heg die uittreksel aan uit die notule waar die betrokke besluit genotuleer is./

Please attach the extract of the minutes reflecting the decision.

b) Volle name en adresse van alle aandeelhouers./Full name and address of the shareholders.

 c) Skriftelike magtiging aan tekengeregtigdes./Written approval of signatories.

 \* Gemagtigde persoon/Authorised person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**15. Is u huidiglik of was u voorheen ‘n lid van enige Telersgenootskap ten opsigte van dieselfde of enige ander ras?**

 **Were you formerly or are you currently a member of any Breeder’s Society with regard to the same or any other breed?**

 **JA/YES /\_\_\_/ NEE/NO /\_\_\_/**

Indien JA, dui die naam van die Genootskap hieronder aan, asook u deelnemernommer, indien beskikbaar:

If YES, state the name of the Breeders’ Society below as well as your participant number, if available:

 **RASGENOOTSKAP:/BREED SOCIETY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **NOMMER:/NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**KUDDEBESONDERHEDE / HERD PARTICULARS**

**16. PLAAS NAAM:**

 **FARM NAME:**

 **/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_/\_\_/\_\_/\_\_/**

**17. DORP OF STAD NAASTE AAN U PLAAS:**

 **TOWN OR CITY NEAREST TO YOUR FARM:**

 **/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**MELD DIE POSADRES WAARHEEN U KORRESPONDENSIE GESTUUR MOET WORD:**

 **POSTAL ADDRESS WHERE YOUR CORRESPONDENCE MUST BE SENT TO:**

**18. ADRESLYN 1/ADDRESS LINE 1**

 /**\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**19. ADRESLYN 2/ADDRESS LINE 2**

 **/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**20. ADRESLYN 3/ADDRESS LINE 3**

 **/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**21. POSKODE:/POSTAL CODE:** /\_\_/\_\_/\_\_/\_\_/

 **TELEFOON NOMMER:/TELEPHONE NUMBER: (\_\_\_\_\_\_\_)(\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)**

 **FAKS:/FAX: (\_\_\_\_\_\_\_)(\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) SEL:/CELL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**22. E-POS ADRES:/E-MAIL ADDRESS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**@**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**23.** **GPS KOöRDINATE (indien beskikbaar):**

 **GPS CO-ORDINATES (if available): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**24. MY KEUSE VIR KUDDEKENMERKE IS:** Verstrek asb. ses (6) kombinasies in orde van voorkeur.

 **MY CHOICE FOR HERD DESIGNATION MARKS ARE:** Please supply six (6) combinations in order of preference.

1. **/\_\_\_/\_\_\_/\_\_\_/\_\_\_/ B) /\_\_\_/\_\_\_/\_\_\_/\_\_\_/ C) /\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**D) /\_\_\_/\_\_\_/\_\_\_/\_\_\_/ E) /\_\_\_/\_\_\_/\_\_\_/\_\_\_/ F) /\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**25. SLEGS VIR STOETTELERS: MY/ONS KEUSE VIR KUDDENAAM(VOORVOEGSEL) IS:**

 **FOR STUD BREEDERS ONLY: MY/OUR CHOICE FOR A HERD NAME (PREFIX) IS:**

 (Verstrek asb. ses (6) keuses in orde van voorkeur.) (Please supply six (6) combinations in order of preference.)

 **(*Name van dorpe en stede word nie toegelaat nie./Names of towns and cities are not allowed.)***

 **VOORVOEGSEL/PREFIX**

 **A) /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

 **B) /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

 **C) /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

 **D) /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

 **E) /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

 **F) /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**26. PAYMENT:/BETALING: SA STAMBOEK**

# BANK: STANDARD BANK, REK. NR.:/ACC. NO.: 041191358, TAK:/BRANCH: 055534

# STAMBOEK FOOIE/STUD BOOK FEES

**STAMBOEK FOOIE / STUD BOOK FEES: (01/07/2021 - 30/06/2022)**

**REGISTRASIE VAN VOORVOEGSEL (Eenmalig)/**

**REGISTRATION OF PREFIX (Once off) R 485.00**

**DEELNAME (Jaarliks) / PARTICIPATION FEE (Annually) R 1 015.00 PRODUKSIE AANTEKENING (Jaarliks) / PRODUCTION RECORDING (Annually) R 950.00**

 **SUB TOTAAL/SUB TOTAL R 2 817.50**

 **TAX/VAT 15% R 367.50**

**TOTAAL/TOTAL R 2817.50**

**PAYMENT:/BETALING: BRAUNVIEH BEESTELERSGENOOTSKAP**

# BANK: STANDARD BANK, ACC NO: 041 181 549, BRANCH: 055534

**GENOOTSKAPSLEDEGELD/SOCIETY MEMBERSHIP FEES R 1150.00 (Prorata R95.83)**

#

 **TAX/VAT 15% R 172.50**

 **TOTAAL/TOTAL R 1 322.50**

 ***(Gelde betaalbaar soos per aangehegte fooistruktuur vir periode: 1 Julie 2021 tot 30 Junie 2022.)***

 ***(Fees payable as per attached fee structure for the period: 1 July 2021 to 30 June 2022.)***

**‘N TJEK OF BEWYS VAN BETALING VIR DIE BEDRAG VAN R \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TER BETALING**

**VAN DIE FOOIE SOOS AANGEDUI, IS AANGEHEG.**

**A CHEQUE OR PROOF OF PAYMENT FOR THE AMOUNT OF R \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ IN PAYMENT**

**FOR THE FEES AS INDICATED, IS ATTACHED.**

**GEBOORTEKENNISGEWINGBOEK:/BIRTH NOTIFICATION BOOK:**

**Indien nie van elektroniese aantekening opsies gebruik maak nie./ If not making use of electronic recording options.**

**(Geboortekennisgewingboeke is beskikbaar op aanvraag./ Birth Notification Books are available on request.)**

**PAYMENTS MUST BE INCLUDED AND MADE OUT ON SEPARATE CHEQUE FOR BOTH ORGANISATION AND CHEQUES MUST BE ATTACHED OR WE WILL NOT BE ABLE TO PROCESS THE APPLICATION**

**BETALINGS MOET GESKIED MET APARTE TJEKS VIR BOGENOEMDE INSTANSIES ANDERS SAL DIE AANSOEK OM LIDMAATSKAP NIE VERWERK WORD NIE.**

**EK ONDERNEEM OM MY AAN DIE BEPALINGE IN DIE GRONDWET EN DIE REëLS, REGULASIES EN VERORDENINGE**

**VAN SA STAMBOEK TE ONDERWERP.**

**I AGREE TO OBSERVE AND BE BOUND BY THE CONSTITUTION AND THE RULES, REGULATIONS AND BYE-LAWS OF SA STUD BOOK.**

**ONDERTEKEN TE HIERDIE DAG VAN**

**SIGNED AT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_THIS \_\_\_\_\_\_\_\_\_\_\_\_DAY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HANDTEKENING VAN APPLIKANT OF GEVOLMAGTIGDE** **HANDTEKENING VAN GENOOTSKAP**

**SIGNATURE OF APPLICANT OR AUTHORISED PERSON SIGNATURE OF SOCIETY**

**PADBESKRYWING VAN NAASTE DORP NA PLAAS WAAR DIERE AANGEHOU WORD OF GPS KOöRDINATE:**

**ROAD DIRECTIONS TO FARM WHERE CATTLE ARE HELD OR GPS CO-ORDINATES:**

 **SKETS ASB ‘N PADKAART OM U PLAAS TE BEREIK:/PLEASEDRAW A ROADMAP TO REACH YOUR FARM:**

|  |
| --- |
|  |

**LYS VAN STAMBOEKDIERE VAN DIE RAS BY WELKE GENOOTSKAP U AANSLUIT**

**LIST OF STUD ANIMALS OF THE BREED OF THE SOCIETY WHICH YOU ARE JOINING**

|  |  |  |  |
| --- | --- | --- | --- |
| **REGISTRASIENOMMER****REGISTRATION NUMBER** | **IDENTIFIKASIE****IDENTIFICATION** | **GESLAG****SEX** | **NAAM VAN DIER****NAME OF ANIMAL**  |
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**PARTNERSHIPS / VENNOOTSKAPPE**

In the event of a partnership one of these documents must be completed for **EVERY** partner in the partnership and these documents must accompany the application for membership / In geval van ‘n vennootskap moet een van hierdie dokumente volledig voltooi word vir **ELKE** vennoot in die vennootskap en moet die dokumente die aansoek om lidmaatskap vergesel.

**I / EK,**

**1. INITIALS**

**VOORLETTERS /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**2. NAME AND SURNAME / NAAM EN VAN**

**/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**3. TITLE** (State PROF., DR., MR., MRS., MISS., etc.)

**TITEL** (Meld PROF., DR., MNR., MEV., MEJ., ens.) /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/

**4.** ADDRESS LINE 1

ADRESLYN 1 /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/

**5.** ADDRESS LINE 2

ADRESLYN 2 /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/

**6.** ADDRESS LINE 3

ADRESLYN 3 /\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/

**7.** POSTAL CODE TELEPHONE NUMBER

POSKODE /\_\_\_/\_\_\_/\_\_\_/\_\_\_/ TELEFOON NOMMER (\_\_\_\_\_\_) (\_\_\_\_\_\_\_\_\_\_\_\_)

FAX CELL

FAKS (\_\_\_\_\_\_) (\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) SEL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**8.** E-MAIL ADDRESS

E-POS ADRES \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **THAT APPLIED FOR MEMBERSHIP UNDER THE MEMBERSHIP NAME:**

 **WAT AANSOEK GEDOEN HET OM LIDMAATSKAP ONDER DIE LIDMAATSKAP NAAM:**

/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/

DO HEREBY AGREE AND AM BOUND TO BE HELD JOINTLY AND SEPARATELY RESPONSIBLE FOR PAYMENT OF ANY MONIES DUE AND PAYABLE TO THIS SOCIETY AS MAY BE PAYABLE FROM TIME TO TIME /

ONDERNEEM EN IS GEBONDE OM GESAMENTLIK OF AFSONDERLIK VERANTWOORDELIK GEHOU TE WORD VIR BETALING VAN ENIGE GELDE WAT AAN HIERDIE GENOOTSKAP VAN TYD-TOT-TYD BETAALBAAR MAG WEES.

GETEKEN TE / SIGNED AT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ON THIS / OP HIERDIE\_\_\_\_\_\_\_\_\_\_DAY OF / DAG VAN 20\_\_\_\_\_\_\_\_.

“*Gevolgmagtigde verteenwoordiger* van vennootskap soos bepaal op ‘n vergadering van die vennote gehou op \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_200\_\_\_\_.”

“*Authorised representative* of partnership as determined at a meeting of partners held on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_200\_\_\_.”

Naam / Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Adres / Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE OF PARTNER / HANDTEKENING VAN VENNOOT**

**FOR COMPLETION BY THE DIRECTORS / MEMBERS OF COMPANIES / CLOSE CORPORATIONS**

**VIR VOLTOOIING DEUR DIE DIREKTEURE VAN MAATSKAPPYE / BESLOTE KORPORASIES**

I / WE (full names and addresses please)

Ek / Ons (volle name en adresse asseblief)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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in my / our capacity as Director of the Company / individual members of the close corporation, declare myself / ourselves prepared in our personal capacities to be held responsible for the payment of the outstanding debts of the Company / Close Corporation.

in my hoedanigheid as Direkteur van die Maatskappy / individuele lede van die Beslote Korporasie, verklaar myself / onsself hiermee bereid om in ons persoonlike hoedanigheid verantwoordelik te wees vir die vereffening van die uitstaande skulde van die Maatskappy / beslote Korporasie.

*Geteken te / signed at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on this / op die \_\_\_\_\_\_\_\_\_day of / dag* van 20\_\_\_\_\_.

“*Gevolmagtigde verteenwoordiger* van maatskappy, private maatskappy of regspersoon soos bepaal op ‘n vergadering van die direkteure / lede gehou op \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_\_\_\_.”

“*Authorised representative* of company, private company or body corporate as determined at a meeting of directors / members held on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_\_\_\_.”

Naam / Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Adres / Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**SIGNATURES / HANDTEKENINGE**

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**SOCIETY OF SOUTH AFRICA**

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