Boxer Club Gold Reef

Affiliated to the Kennel Union of Southern Africa

Contact: May Oosthuizen
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APPLICATION FOR MEMBERSHIP

(Subject to Committee Approval)

I hereby apply for membership of the Transvaal Boxer Club and undertake to conform to the Constitution and Rules of the Club. I enclose a cheque/postal order/cash for:

☐ R75 Single membership ☐ R100 family membership
☐ R40 pensioner (single) ☐ R60 pensioner (family)

(annual subscription, renewable yearly on 30th November)

BANK DETAILS:
ABSA Westgate
10-3222-1218
Fax proof of deposit & application to
(011) 763 6551

NAME (S) IN FULL - ADULTS:

Dr / Mr / Mrs / Miss _____

Dr / Mr / Mrs / Miss _____

Children: _____M/F _____ Age: _____
_____ M/F _____Age: _____
_____ M/F _____Age: _____
_____ M/F _____Age: _____

ADDRESS

Street _____
_____Code _____

Postal _____
_____Code _____

Telephone (H) _____ Cell _____

Telephone (W) _____ Fax _____

E-mail _____

PRESENT/PREVIOUS CLUBS OF WHICH MEMBERSHIP HELD

1. _____ Tel. _____
2. _____ Tel. _____
3. _____ Tel. _____

APPLICATION PROPOSED BY: _____
APPLICATION SECONDED BY: _____

SIGNATURE OF APPLICANT/S: _____ DATE: _____

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