



NPO: 038-396

Membership Form

E-mail: info@touchingnations.org
Web: www.touchingnations.org

Civic Avenue, Matroosfontein
Elsies River, 7493
Tel: 021 933 1424 Fax: 021 933 1545

**APPLICATION FOR MEMBERSHIP MUST BE COMPLETED AND SUBMITTED TO THE MANAGEMENT BOARD.
AANSOEK OM LIDMAATSKAP MOET VOLTOOI WORD EN OORHANDIG WORD AAN DIE BESTUURRAAD.**

1. Name and Surname of Applicant
Naam en Van van Aansoeker _____
2. Telephone numbers
Telefoon nommers _____ / _____
3. Address of Applicant
Adres van Aansoeker _____
4. Date of Application
Aansoek datum _____

I understand that I:

1. The organization's management committee is required to give approval before membership is bestowed on anyone. The criteria for membership shall be determined by the management committee from time to time.
2. Membership is open to all NGO's, FBO's, CBO's, service deliverers and other interested parties who share the same objectives.
3. The names of all official members will be recorded in a membership register.
4. Members of the organisation are expected to attend its Annual General Meeting so as to exercise their right to determine the policy and direction of the organisation for the year to come.
5. The members of the organisation are required to abide by decisions that are taken by the management committee.

Members are encouraged to:

1. Be active community workers or/and be affiliated to Touching Nations or desiring such a role.
2. Have a proven record of community service in another related area of social service.

Please sign your name.

Account Details: ABSA Bank
Account: 406 152 3259 Branch
code: 632005
SANBEL



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For Office Use Only	
<input type="checkbox"/> Accepted	<input type="checkbox"/> Declined
<i>Board member signature</i>	<i>Board member signature</i>

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