

EAST RAND HIKING CLUB

www.eastrandhikingclub.co.za **E-Mail:** membership@eastrandhikingclub.co.za

APPLICATION FOR MEMBERSHIP

SURNAME (Dr/Mr/Mrs/Miss/Ms)	
FIRST NAMES	I.D. No
SPOUSE	I.D. No
CHILDREN (Under 18)	I.D. No
	I.D. No
E-Mail Address	Mobile
ADDRESS: Home	Phone (Home)
	Fax (Home)
POSTAL ADDRESS (i.e. <u>Address for Mail</u>)	Phone (Work)
	Fax (Work)
MEDICAL CONDITIONS OF WHICH THE CLUBS	
HIKING EXPERIENCE	
	B MEMBERSHIPS
MEMBERSHIP FEES: 1 March 2021 to 28 February R290.00 R425.00	aary 2022
Please note that you will be required to hike at your application will be processed. Membership your processed application.	
I hereby declare that I/we indemnify the Organ for any liability for loss of/or damage to my/ou or any other claim that may arise from my undertake to adhere to the Club Rules and Cod	r property or injury to my/our person(s) //our participation. Furthermore, I/we
APPLICANT'S SIGNATURE	DATE