

## AANSOEK OM LIDMAATSKAP / APPLICATION FOR MEMBERSHIP

TITEL / TITLE: \_\_\_\_\_ VOORNAME / FIRST NAMES: \_\_\_\_\_

VAN / SURNAME: \_\_\_\_\_

I.D.NR: \_\_\_\_\_

MAATSKAPPY WAAR WERKSAAM / COMPANY WHERE EMPLOYED:  
**POSBESKRYWING / JOB TITLE:** \_\_\_\_\_  
**POSADRES / POSTAL ADDRESS:** \_\_\_\_\_  
  
**POSKODE / POSTAL CODE:** \_\_\_\_\_

I would like to receive the Journal in hard copy (at an extra cost of R300.00)

YES                       NO

TEL NO : (W) \_\_\_\_\_ FAX NO : \_\_\_\_\_

SEL NO.: \_\_\_\_\_

E-POS / E-MAIL: \_\_\_\_\_

KWALIFIKASIES / QUALIFICATIONS: \_\_\_\_\_ DATUM / DATE: \_\_\_\_\_

DATUM IN BEDRYF BEGIN WERK / DATE FIRST EMPLOYED: \_\_\_\_\_

**BELANGSTELLINGS / INTERESTS:**

WYNKUNDE <input type="checkbox"/>	WINGERDBOU <input type="checkbox"/>	TAFELDRUIWE <input type="checkbox"/>	EKONOMIE <input type="checkbox"/>
OENOLOGY	VITICULTURE	TABLE GRAPES	ECONOMY

APPLIKANT SE HANDTEKENING / APPLICANT'S SIGNATURE: \_\_\_\_\_

BEIDE VOORSTELLER EN SEKONDANT MOET SAWWV-LEDE WEES / BOTH PROPOSER AND SECONDER MUST BE SASEV MEMBERS

<b>VOORSTELLER / PROPOSER:</b>  NAAM / NAME _____ ADRES / ADDRESS _____  HANDTEKENING / SIGNATURE _____	<b>SEKONDANT / SECONDER:</b>  NAAM / NAME _____ ADRES / ADDRESS _____  HANDTEKENING / SIGNATURE _____
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----- **Vir Kantoorgebruik:** -----

Kwit no	..... Aanvaardingsdatum .....	..... Sekretaris handtekening .....	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brief	Ledelys	Lid no .....	Pastel ..      Sertifikaat

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