|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SA BISLEY UNION**  P.O. Box 38774 Faerie Glen 0043  Tel 082 490 0193 Fax 086 444 1700  E-mail admin@sabisley.com  **2023 MEMBERSHIP**   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **New** |  | **Renewal\*** | **Payable before 28/02/2023**  **\*Please pay fees at your Province** |  | | | | | | | | | | | | | | | | **FOR OFFICE USE ONLY:** | | | | |
| Date Received: | | | |  |
| SABU No: | | | |  |
| Payment: | | | |  |
| Invoice No: | | | |  |
| **1** | **Annual Member / Jaarlikse Lid** | | | | | | | | | | **R 750.00** | | | | | | | |  |
| **2** | **Affiliated Member / Geaffilieerde Lid** | | | | | | | | | | **R 750.00** | | | | | | | |  |
| **4** | **Veterans over 70 / Veterane Bo 70** | | | | | | | | | | **R 190.00** | | | | | | | |  |
| **5** | **Junior (Under 19 – Onder 19)** | | | | | | | | | | **R 375.00** | | | | | | | |  |
| **6** | **Full Time Student Under 25** | | | | | | | | | | **R 375.00** | | | | | | | |  |
| **7** | **Life member Levy / Lewens Lange Lede** | | | | | | | | | | **R 375.00** | | | | | | | |  |
| **8** | **Life member/Lewens Lange Lede O/Bo 70** | | | | | | | | | | **R 190.00** | | | | | | | |  |
| **9** | **Late Payment Fee** (If paying after 28/02/2023) | | | | | | | | | | **R 50.00** | | | | | | | |  |
| **10** | **Total** | | | | | | | | | |  | | | | | | | |  |
| *Use BLOCK letters – Please full in all the information.* | | | | | | | |  | | | | *Gebruik DRUKSKRIF – Vul asseblief alle inligting in.* | | | | | | | |
| **SABU Number** | |  | | | | | | | | | | | | | | | | | **SABU Nommer** |
| First Names | |  | | | | | | | | | | | | | | | | | Volle Name |
| Surname | |  | | | | | | | | | | | | | | | | | Van |
| Identity Number | |  | | | | | | | | | | | | | | | | | Identiteitsnommer |
| Residential Address | |  | | | | | | | | | | | | | | | | | Residensiële Adres |
|  | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | |  |
| Postal Code | |  | | | | | | | | | | | | | | | | | Poskode |
| Postal address | |  | | | | | | | | | | | | | | | | | Posadres |
|  | | | | | | | | | | | | | | | | |
| Postal Code | |  | | | | | | | | | | | | | | | | | Poskode |
| Tel No | |  | | | | | | | | | | | | | | | | | Tel Nr |
| Fax No | |  | | | | | | | | | | | | | | | | | Faks Nr |
| Cell No | |  | | | | | | | | | | | | | | | | | Sell Nr |
| Email address | |  | | | | | | | | | | | | | | | | | E-pos Adres |
| Shooting Province | |  | | | | | | | | | | | | | | | | | Skietprovinsie |
| Name of Club | |  | | | | | | | | | | | | | | | | | Klubnaam |
| **In terms of Clause 5 of the SABU Constitution** - Membership is a compulsory requirement for participation in the management of the Union, or entry to any competition arranged by SABU or provincial associations and clubs affiliated to SABU. Said membership is subject to the approval of the SABU Council on the condition that the member must be a member in good standing of one of SABU’s affiliated clubs. Said condition is only applicable to South African residents who apply for membership. | | | | | | | | | | | | | | | | | | | |
| Are you a paid up Member of a SABU Club? | | | Yes | | | | | | | No | | | | | | | | | Is u ‘n opbetaalde lid van ‘n SABU Klub? |
| Discipline and Class | | | TR A | TR B | | F-TR | | | F-Open | | | | Sport-skiet | | | .303 | | BP | Dissipline en Klas |
| Please state your primary shooting Federation | | | Bisley | | Smallbore | | Air Rifle | | | | | | | BPSU | | | Other | |  |

#### I agree to abide by the SABU Rules / Ek aanvaar die SABU Reëls

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

**Signature / Handtekening Date / Datum**