FARANANI ATHLETICS
CLUB REGISTRATION FORM
2020

PLEASE NOTE THAT THIS FORM MUST BE FILLED IN TOGETHER WITH THE ASA LICENCE FORM FOR 2020

TITLE | **NAME** | **SURNAME**

DATE OFBIRTH Y M D **GENDER**

POSTALADDRESS

CODE:

CONTACTDETAILS

CELLNUMBER | **E-MAIL**

RUNNINGHISTORY

LONGEST RACE FINISHED e.g. 10km, 21km, 42km etc | **TIME** h m

TARGET FOR 2020 e.g. to finish 21km within2hours

CLUB MEMBERSHIPFEES

FARANANI AC JOINING FEE FOR 2020	**R310.00**	**COMPULSORY**
ATHLETICS SOUTH AFRICA LICENSE FEE	**R180.00**	**COMPULSORY**
OFFICIAL CLUB VEST (*only payable if you do not have an official club vest)	**R260.00**	*
TOTAL With Club Vest	**R690.00**	
TOTAL Without Club Vest	**R490.00**	

TOTAL for school goers (without official club vest)	**R290.00**
TOTAL for school goers (with official club vest)	**R490.00**

Payments can be made to the following account: ABSABANK

Acc. Name: FARANANI ATHLETICSCLUBAcc. no. 9232675393(SAVINGS)
Branch code:632005
REF: YOUR INITIALS AND SURNAME e.g. FNDOU

Please return completed forms WITH PROOF OF PAYMENT to:
register@farananiac.co.za

CLUB RULES AND DISCLAIMER

1. Membership to club is valid for one calendar year (01 JAN to 31 DEC 2020)

2. Upon registration, all members who do not have an official club vest must purchase the official club running vest(R260.00)

3. Members are humbly requested to wear the official club kit during any official race, so as to advertise the club

4. Members are allowed to add their names or any other branding such as the comrades badge to the official running vest

5. Members are prohibited from printing their own versions of the club vest

6. Faranani Athletics Club, its affiliates and office bearers are absolved from and indemnified against any loss or damages that might befall the member before, during or after any race

7. By signing this form the member agrees to adhere to the membership code set out in the club's constitution (available on request) and the above mentioned rules and disclaimer

_____ _____ _____/____/20____

NAME & SURNAME(PRINT) **SIGNATURE** **DATE**

FOR OFFICEUSE
APPLICATION NO.
ASA LICENCE NO.