

AZANIAN PEOPLE'S ORGANISATION

HEAD OFFICE:
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MEMBERSHIP APPLICATION FORM

Surname

First Name(s)

Residential Address Code.....

Postal Address Code.....

Telephone (h)..... (w) (Cell)

Facsimile E-mail

Date of Birth Identity Number

Gender (M/F) Occupation

Province Region

Municipality or District Branch/Unit

Polling Station (Name) Ward

I solemnly declare that I will abide by the Code of Conduct of the Azanian People's Organisation and **uphold its aims and objectives** as set out in the Constitution; that I am joining the organisation voluntarily and without any motives of personal gain or material advantage, and that I will participate in the activities of the organisation as a loyal, dedicated and disciplined member.

Applicant's Signature Date

FOR OFFICE USE ONLY

Membership Number:

Membership Approved by

Designation (Print): Name (Print)

DEBIT ORDER INSTRUCTION

(FOR MEMBERSHIP SUBSCRIPTION FEES)

I hereby request the Azanian People's Organisation (AZAPO) to draw against my bank account the amount of R commencing on the of (month) 20.....(year) and future debits on the of the month thereafter. I request my bank whichever it is (or will be) to debit my account with such amounts drawn against it by AZAPO in terms of this request. *Please note that there is also a Joining Fee of R20.00 (once off payment).*

I understand that AZAPO will inform me if the amount quoted above is altered.

BANK NAME _____

BRANCH NAME AND TOWN _____

BRANCH NO _____

ACCOUNT NO _____

SUBSCRIBER'S SIGNATURE _____

ACCOUNT TYPE 1 = Current 2 = Savings 3 = Transmission 4 = Bond 5 = Subscription Share

DATE _____

FOR OFFICE USE ONLY

APPROVED BY (OFFICIAL) _____

DESIGNATION _____

SIGNATURE _____

MEMBERSHIP CARD NO _____

STAMP

