

SOUTH AFRICAN BISLEY UNION

APPLICATION FOR DEDICATED SPORTSMAN MEMBERSHIP

1. DETAILS OF APPLICANT:

SURNAME : _____

FIRST NAMES : _____

IDENTITY NUMBER : _____

RESIDENTIAL ADDRESS : _____

_____ CODE: _____

POSTAL ADDRESS : _____

_____ CODE: _____

TEL : (W) _____ (H) _____

(CELL) _____ (F) _____

(E- mail) _____

SABU NUMBER : _____

PROVINCE : _____

2. MOTIVATION FOR APPLICATION:

3. **RECOMMENDATION BY PROVINCE**

RECOMMENDED BY : _____
(Full Names)

IDENTITY NUMBER : _____

PROVINCE : _____

POSITION IN PROVINCE : _____

REASON FOR RECOMMENDATION:

DECLARATION:

I, the undersigned, hereby declare that all the information furnished above is true and correct.

I understand that the deliberate falsifying of any records or the deliberate provision of false information in an attempt to receive accreditation as a sport shooter will result in severe disciplinary action being taken against the Province and against the individual member by SABU.

SIGNED ON THIS THE _____ DAY OF _____

AT _____ .

ON BEHALF OF PROVINCE

FOR SABU OFFICE ONLY

APPLICATION APPROVED

APPLICATION REJECTED

REASON FOR REJECTION:

CHAIRMAN

FULL NAMES : _____

DATE : _____
