



Member Application Form

1 March 2024 - 28 Feb 2025

Member number
(assigned by association)

DATE

NAME

SURNAME

ID

PARENT/GUARDIAN NAME & SURNAME

TEL No.

E-MAIL

GENDER

Male	Female
------	--------

AGE

Junior U/13	Junior U/18	Adult
----------------	----------------	-------

PROVINCE

CLUB

RESIDENTIAL ADDRESS

.....

.....

.....

Senior Registration Fee

R180

Method of payment

EFT

Proof of payment & copy of ID must be mailed to: admin@sahfta.org.za

Junior Registration Fee

R120

Bank details

Acc Name: South African Hunter Field Target Association
Bank: Nedbank Branch: 10911400
Acc No: 1188800922, Type: MM Investment Account
Reference example: (club)(name & surname)

I, the undersigned, undertake to abide by SAHFTA Rules & Regulations, Constitution, SAFTAA Code of Conduct and the disciplinary process. I undertake to set the Associations free of any liability & shall not be liable for any obligation of SAHFTA/SAFTAA, nor will the SAHFTA/SAFTAA be liable for any obligation of the individual.

Signed at

.....

Date:

.....

APPLICANT SIGNATURE (PARENT/GUARDIAN)

SAHFTA Rules & Regulations, Constitution & SAFTAA Code of Conduct may be viewed @ www.sahfta.org.za

Please complete form as thoroughly as possible. Membership is valid from March to February of every year. In the event of applicant being under the age of 18, his/her Parent/Guardian information is mandatory.