

SEDGEFIELD RATEPAYERS AND RESIDENTS ASSOCIATION
APPLICATION FOR GROUP MEMBERSHIP 2021

KINDLY COMPLETE THE INFORMATION AS SET OUT BELOW AND SUBMIT YOUR APPLICATION TO THE SECRETARY OR E-MAIL TO sedgefield.ratepayers@gmail.com

AS SOON AS WE HAVE PROCESSED YOUR APPLICATION WE WILL ADVISE YOU OF THE AMOUNT OF YOUR ANNUAL MEMBERSHIP FEE AND OF THE NUMBER OF VOTES YOU CAN ENJOY IN TERMS OF OUR CONSTITUTION. THIS NUMBER WILL REMAIN FIXED FOR THE YEAR AS SOON AS YOUR PAYMENT IS RECEIVED

1. **NAME OF BUILDING/ COMPLEX/DEVELOPMENT:** _____
2. **PHYSICAL ADDRESS:** _____
3. **POSTAL ADDRESS:** _____
4. **CONTACT PERSON:** _____
5. **TELEPHONE NO:** _____
6. **FAX NO:** _____
7. **CELLPHONE NO:** _____
8. **E-MAIL:** _____
9. **TOTAL NUMBER OF MEMBERS:** _____
10. **DESIGNATED VOTING REPRESENTATIVE:** _____
11. **DATE:** _____

Bank Details for membership fees:

ABSA Current Account
Branch: Sedgefield 632 005
Account number: 909 612 4798