



## MEMBERSHIP APPLICATION FORM

If you and your family would like to join the Strandveld Plaaswag, please fill in your details below and either email (strandveldplaaswag.co.za) or WhatsApp (079 432 2838) the signed form to our Treasurer, Carla Kessler, who will email or WhatsApp you your membership fees quote.

**Surname:**

**First Name:**

**Email:**

**Cell Number/s:**

**ID Number:**

**Occupation:**

**Farm Name & Address / Bbos Street Name & Number:**

  
  

.....  
**SIGNATURE**

.....  
**DATE**