

Membership Number: 2009/  
 Surname: \_\_\_\_\_  
 Marital Status: \_\_\_\_\_

Date Joined: \_\_\_\_\_  
 Expiry Date: \_\_\_\_\_



First Name (Mom): \_\_\_\_\_  
 ID Number (Mom): \_\_\_\_\_  
 Date of Birth (Mom): \_\_\_\_\_  
 Occupation (Mom): \_\_\_\_\_  
 Company (Mom): \_\_\_\_\_  
 First Name (Dad): \_\_\_\_\_  
 ID Number (Dad): \_\_\_\_\_  
 Date of Birth (Dad): \_\_\_\_\_  
 Occupation (Dad): \_\_\_\_\_  
 Company (Dad): \_\_\_\_\_  
 Physical Address:  
 Address 1: \_\_\_\_\_  
 Address 2: \_\_\_\_\_  
 Address 3: \_\_\_\_\_  
 Code: \_\_\_\_\_  
 Children:

Email Address: \_\_\_\_\_  
 Expect (twin/trip..): \_\_\_\_\_  
 Due Date: \_\_\_\_\_  
 Contact Numbers:  
 Home: ( ) \_\_\_\_\_  
 Fax: ( ) \_\_\_\_\_  
 Cell (Mom): ( ) \_\_\_\_\_  
 Cell (Dad): ( ) \_\_\_\_\_  
 Work (Mom): ( ) \_\_\_\_\_  
 Work (Dad): ( ) \_\_\_\_\_  
 Postal Address:  
 Address 1: \_\_\_\_\_  
 Address 2: \_\_\_\_\_  
 Address 3: \_\_\_\_\_  
 Code: \_\_\_\_\_

Singleton/ Twin/Trip	Identical/ Fraternal	Names	Gender	Gestation (weeks)	Natural/ C Section	Birth Weight	Birth Date	Hospital	Fertility Drugs?	Drug Type
									<input type="checkbox"/>	
									<input type="checkbox"/>	
									<input type="checkbox"/>	
									<input type="checkbox"/>	
									<input type="checkbox"/>	
									<input type="checkbox"/>	

Do you have multiples in your family?  Please specify: \_\_\_\_\_  
 Are you willing to help on SAMBA committee?  Please specify: \_\_\_\_\_  
 If you have a special needs child or a child with disabilities,  Please specify: \_\_\_\_\_  
 would you like to be contacted (if known, please specify)?  
 Would you like multiples listed for Ad Agencies for adverts?  Where did you hear about SAMBA?: \_\_\_\_\_

MEMBERSHIP FEES:	Price	Qty	Total
Inside RSA	R150.00		
Outside RSA	R180.00		
<b>BABY ON BOARD SIGN (Circle relevant)</b>			
2 / 3 / 4 ON BOARD	R30.00		
2 / 3 / 4 OP WIELE	R30.00		
<b>SHIRTS (Circle relevant):</b>			
Kids - Maroon (56cm, 58cm, 60cm) - Temporarily out of stock			
Adults - Navy Blue/ Stone (Adults - S, M, L, XL, XXL)	R50.00		
<b>ADD POSTAGE IF SHIRTS ARE ORDERED:</b>	R25.00		
<b>TOTAL:</b>			

\* POST APPLICATION FORM AND DEPOSIT SLIP/COPY TO: PO Box 68858, Highveld, 0169  
 \* IF YOU WOULD LIKE TO BANK DIRECT, FAX COMPLETED FORM AND DEPOSIT SLIP TO 086 552 7507  
 \* BANKING DETAILS: Nedbank, Epsom Downs (152205), SAMBA National, Account: 1522014624