



PROTEA SPORTS CLUB

Affiliated to the WP Sports Association for the Physically Disabled
67 Main Road. Retreat. Cape.
Tel (021) 7125220
www.protea.org.za
steve@protea.org.za

APPLICATION FOR MEMBERSHIP

I make application for membership of the Protea Sports Club, and if accepted will adhere strictly to the rules and regulations of the club.

Address:		
Telephone (h)	(w)	(Cell)
Email address		
Date of birth	Occupation	
Club Section		

I enclose the amount of R being the annual club subscription fees. I am aware of the aims of the club and the fees payable. I agree to abide by the current club rules as laid down in the Club Constitution as displayed on the club notice board and to any future amendments. I am aware of, and understand the waiver of indemnity as set out below.

Applicant signature	Date
Sponsored by:	Secunder Signature

I hereby irrevocably waive all claims against the Protea Sports Club for any damage or loss suffered while I am, or as a consequence of my being a member of the Protea Sports Club and arising out of (a) death, bodily injury, loss of health or illness to me or any person, and (b) loss or destruction of, or damage to any property belonging to me or any other person however such loss or damage is caused, but not limited through the negligence of any such official, employee or representative of the Protea Sports Club (c) without derogating from the generality of the foregoing, I particularly indemnify and hold harmless the Protea Sports Club against all claims which may be made against it by me or my dependants or any one or more of them and specifically reiterate that this indemnity shall be binding on my heirs, executors, administrators and assigns.

Application approved at a meeting held on	
Chairman	Secretary