

APPLICATION FOR MEMBERSHIP

APPLICANT (mark with a x): AFFILIATED MEMBERSHIP STATUTORY MEMBERSHIP	DIRECTI	Y AFFECTED GROUP MEMBERSHIP
Name of Applicant / Organisation:		
Tel no:	Email:	
Name of person applying on behalf of Applicant / Organisation	Capacity:	
Objectives of Applicant / Organisation 1		
2		
Short motivation as to how the Applicant / Organisation will contribute towards the activities and objectives of PMSA:		
1		
 I, the undersigned, hereby apply for membership of Predation Management South Africa (PMSA): understand that membership fees will be determined by PMSA. Understand that the following annual membership fees apply to the following applicants: Affiliated members R25 000 Directly affected group members R 1 000 Statutory members None hereby confirm that I am authorized to sign this document on behalf of the Applicant / Organisation. 		
Signature of Applicant:		
Date:	Place:	Date: