



# KZN MASTERS ATHLETICS

## 2025 MASTERS MEMBERSHIP FORM

2025 Licence No: \_\_\_\_\_ 2024 Licence No: \_\_\_\_\_

Athletics Club: \_\_\_\_\_

Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postal code: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / 19\_\_\_\_

Identity No: \_\_\_\_\_

### PLEASE ATTACH COPY OF I.D.

PHONE: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (CELL) \_\_\_\_\_

e-mail Address: \_\_\_\_\_

INTERESTS: - Please indicate by marking each block with **X**:

TRACK:  FIELD:  WALKING:  ROAD:  X-COUNTRY:

Please make with an X if you do not wish for your photograph to be used on our website.

ANNUAL SUBSCRIPTION FEE: **R350** (EFT)

I Declare that I am a bone fide amateur athlete and I subject myself to the Rules and Regulations of KZN Athletics, S.A. Masters, ASA and KZN Masters Athletics.

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Signature: \_\_\_\_\_

### BANK DETAILS:

Account holder:

Bank:

Account Number:

Account type:

Branch:

Branch Code:

**Masters Athletics Association-KZN**

**First National Bank**

**54990793811**

**Current Account**

**Overport**

**222826**

The KZN Masters Athletics Association will endeavour to protect your personal information.

**CONTACTS:** Chairperson: Shona Hutchinson Mobile 079 874 6498 e-mail: [hutchinsonshona@gmail.com](mailto:hutchinsonshona@gmail.com)

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