

# Midway Bonsai Society



## Application for Membership

Please email the completed form and proof of payment to [cwarrington@sew.co.za](mailto:cwarrington@sew.co.za)

Date of application	
Full Name	
Surname	
Profession	
Postal Address	
Telephone Nr	
Fax Nr	
E-Mail	
Birth date	
Bonsai Experience	Novice <input type="checkbox"/> 1-5 Years <input type="checkbox"/> 6 -10 Years <input type="checkbox"/> 10+ Years <input type="checkbox"/>
	Year Started :

Applicants Signature	
----------------------	--

Membership Fees (payable before End November)			
Subscription Paid	Cash <input type="checkbox"/>	EFT <input type="checkbox"/>	Payment Details:
			Bank Capitec Bank
			Account Name J Espach
			Account Number 1494613733
			Branch Code 47 00 10

### For Office Use

Tabled at Committee Meeting			
Accepted:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Signed By: _____
			(Chairman)
Remarks			