

2010 LICENSING FORM

The completeness and accuracy of this submission, helps to improve Athletics South Africa's service to you. Thank you.



<input type="checkbox"/> Athlete	<input type="checkbox"/> Coach	<input type="checkbox"/> Technical Official	<input type="checkbox"/> Track & Field	<input type="checkbox"/> Cross Country	<input type="checkbox"/> Road Running	<input type="checkbox"/> Race Walking
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Your details (Please tick where appropriate)

Surname										Title (Mr/Mrs/Miss/Dr etc)			
First names										Initials			

<input type="checkbox"/>	<input type="checkbox"/>	ID number (ID)	<input type="checkbox"/>	<input type="checkbox"/>	Birth certificate (BC)	<input type="checkbox"/>	<input type="checkbox"/>	Permanent residence number (PR)	Please enter the relevant number			
License number (2009)		License number (2010)		Province								

Club name (in full)													
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Gender	<input type="checkbox"/> Female	<input type="checkbox"/> Male	Date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Category as at 1/1/2010	<input type="checkbox"/> Youth	<input type="checkbox"/> Junior	<input type="checkbox"/> Senior	<input type="checkbox"/> Vets	<input type="checkbox"/> Master	<input type="checkbox"/> GrandMaster								

Residential address – Domicilium rule								Postal address							
Code								Code							

Tel code				Telephone number (Home)				Tel code				Telephone number (Work)			
Cellphone number															

Email address													
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Home language													
<input type="checkbox"/> Afrikaans	<input type="checkbox"/> English	<input type="checkbox"/> Sotho	<input type="checkbox"/> Xhosa	<input type="checkbox"/> Zulu	<input type="checkbox"/> Other (specify)								

Occupation													
Company name or Self Employed													
Type of business													

From time to time Nedbank and/or ASA send out marketing or Nedbank Series material that may be of interest to Nedbank Series participants. Please tick if you would like to receive. Tick to receive

(To be completed by Administrator)	Fees received	R	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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I declare that I am a bona fida athlete/coach/technical official. I confirm that all the information provided on this application is true and correct. I subject myself to the rules and regulations of Athletics South Africa, and the IAAF, and I undertake not to compete in any track meeting, road race, cross country event, race walking event, or fun run which is not sanctioned by the provincial athletics body and ASA. I indemnify ASA, the provincial body, sponsors and organisers of any race against all and any action of whatever nature which may arise out of my participation in any race, and I agree that it is my responsibility to be medically fit to compete in any event.

Date	Signature
Signature of parent/guardian (where applicant is under the age of 16 years)	Signature
Signature of the club representative	Signature
Signature and stamp of the province	Signature

Welcome to the Athletics South Africa family