

EMBA

Ethekwini Mountain Bike Association

P O BOX 2081
HILLCREST
3650

Email : Margie@peakevents.co.za

Tel : 082 714 2471

Fax : 086 609 3995

LICENCE APPLICATION / RENEWAL

- **Application to be submitted via your Club**
- Complete in full, in **BLOCK** capitals
- No licence application will be accepted without the duly signed Indemnity form
- One Passport / ID Photo to be attached if a **NEW** application
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Mr/Mrs/Miss	SURNAME		FIRST NAME	
CLUB		CSA No		EMBA No
ID NUMBER OR DATE OF BIRTH & PASSPORT NUMBER				
POSTAL ADDRESS				
			CODE	
CELL NO		LAND LINE		
EMAIL PLEASE PRINT				
MEDICAL AID		M/AID No		
ALLERGIES OR MEDICAL CONDITIONS				
EMERGENCY CONTACT NAME		EMERGENCY CONTACT No		
TONGAAT HULLETT EMPLOYEE	YES	NO		

Bank Details ABSA Hillcrest Br Code 631126
Cheque A/C No 4069799583 A/C Name : EMBA

SIGNATURE **DATE**