



P.O Box 65  
Okahandja  
Namibia

Fax to E-mails: 088-617-244  
E-Pos: [moringa@iway.na](mailto:moringa@iway.na)  
Cell: 081-124-0673 (Mr.Rix)  
Cell: 081-894-7424 (Secretary)

## APPLICATION FOR MEMBERSHIP

*(Personal Information)*

TITLE: (Prof, Dr, Mr, Mrs, Miss, etc) \_\_\_\_\_

INITIALS: \_\_\_\_\_

SURNAME: \_\_\_\_\_  
(or membership name if not an individual)

TYPE OF MEMBERSHIP FOR WHICH APPLICATION IS MADE:

(indicate the applicable item with a X)

INDIVIDUAL MEMBER  PARTNERSHIP  COMPANY  TRUST

VAT NUMBER: \_\_\_\_\_

ADDRESS OF APPLICANT: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TEL: \_\_\_\_\_ (W) \_\_\_\_\_ (H) \_\_\_\_\_ (Cell)

FAX: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

MEMBERSHIP REQUIRED AS FROM: Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_

MY HERD DESIGNATION MARKS ARE:

MY HERD NAME: \_\_\_\_\_

FARM NAME: \_\_\_\_\_

TOWN NEAREST TO YOUR FARM: \_\_\_\_\_

TYPE OF YEAR IDENTIFICATION THAT WILL BE USED FOR IDENTIFICATION OF ANIMALS  
(indicate applicable block)

YEAR NUMBER  TWO DIGIT YEAR NUMBER

ANIMAL-, SEX INDICATOR SEQUENCE NUMBERS WITHIN HERD WILL BE UTILIZED AS FOLLOWS:

Both sexes utilize one set of sequence numbers

MUST SEQUENCE NUMBERS BE RESET TO ONE AT CHANGE OF A YEAR?  
(indicate applicable block)

YES  NO

SIGNED AT \_\_\_\_\_ ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
SIGNATURE



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Cell: 081-268-8939 (Secretary)

I, the undersigned, agree to be bound by the Constitution and the rules, regulations and bye-laws of the Society.

A cheque / postal order (delete which is not applicable) to the amount of N\$

\_\_\_\_\_ in payment of the following is attached hereto:

MEMBERSHIP FEE                      N\$800.00                      (from January to December)

SIGNED AT \_\_\_\_\_ ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_  
20\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF APPLICANT



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### **PADBESKRYWING / ROUTE DESCRIPTION**

**LET WEL:** Hierdie padbeskrywing moet deur alle lede voltooi word. Verstrek asseblief in duidelike skets waarop die pad na die plaas (plek van inspeksie) in kilometers aangedui word.

**NB:** This route description must be completed by all members. Please supply a distinct sketch outlining the direction to the farm (place of inspection) in kilometers.

NAAM / NAME: \_\_\_\_\_

PLAAS ADRES / FARM ADDRESS: \_\_\_\_\_

TEL: Plaas / Farm: \_\_\_\_\_ Besigheid / Business: \_\_\_\_\_

AFSTAND(KM) VAN NAASTE DORP / DISTANCE(KM) FROM NEAREST TOWN: \_\_\_\_\_

#### ***PADBESKRYWING / ROUTE DESCRIPTION:***