



IRENE VILLAGERS CRICKET CLUB

Address: Irene Country Club, 1 Main Rd, Centurion, 0062

Phone: 012 6671081

Website: www.ivcc.co.za

APPLICATION FOR SENIOR CRICKET MEMBERSHIP

1. Registrations are only acceptable in writing and are governed by the Irene Villagers Cricket Club Subscriptions Policy: 002
2. Copies of the Club Constitution are available on request from the Cricket Office.
3. One application per person is required
4. Email application form to michelle@irenecc.co.za and CC cricket@irenecc.co.za

Please indicate type of membership (Answering Questions 1-3) [Use an 'X']

1.	Member Affiliation:	Ladies (R500)	* Young members (R900)	Social (R500)	Students (R600)	Full (R1350)
2.	Membership Type:	Full season Member		§Half Season Member (Indicate which half)		
				1 st	2 nd	
3.	Payment Option	EFT	Cash @ Club Office	Credit Card	Debit Order	

* Young and Student Members must be **younger than 25** years of age before the 1st October 2018 [Not 25]

* **Student Members must present proof of student registration.**

§ Reason for choosing Half Year Membership (R50 Handling Fee): _____

- **A DISCOUNT of 5% on memberships is applicable if the full membership fee is paid by 15th September 2018**

Details of Applicant

SURNAME: _____ Mr/Prof/Adv/Mrs/Miss/Mstr/Dr

NAME (s): _____

ID. No of Player: _____ Current Age: _____

Postal address: _____ Residential address: _____

Postal code: _____ Postal code: _____

Tel (cell): _____ Tel (W): _____ Fax: _____

Email: _____

Have you been a member of the cricket club before?	YES / NO
If YES, are you up to date with your subs payment	YES / NO
OR were you a member of another club within the Northern Union League during the past season?	YES / NO
If YES do you have a clearance certificate from your previous club?	YES / NO

Signed this: _____ day of _____ 20____. Signature: _____

By attaching my signature hereto agree to adhere to the Rules and Regulations of the IVCC and ICC Constitution; and declare that the subscriptions will be paid before 30 September & 31 January respectively

*Please note that you will be required to represent a team for league fixtures which you have been selected for by the **Selection committee**, which if not adhered to will be referred to the Cricket committee and the relevant sub-committee for further disciplinary action if deemed necessary

NB* Please note that resignations for the 2018 / 2019 season must be made in writing before 14 days after signing this form. If no resignation is received by the Cricket Committee, the member will be billed for the full season accordingly

*If applicant is a minor:

Name of Major Responsible (Parent/Guardian): _____ Capacity: _____

Contact Number of Major (In case of Emergency): _____ Alternate number: _____

Email: _____ Signature: _____

Memberships Office: Michelle Pauls Signature: _____

FOR OFFICE USE:

Invoice Number: _____ Receipt Number: _____

Paid on delivery of this form (Yes/No): _____