|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MEMBERSHIP APPLICATION FORM MEMBER NUMBER** | | | | | | | | | | | | | | | 1810 000\_\_\_\_\_\_\_\_\_ |
| *INDICATE WHICH HOLIDAY CLUB YOU WISH TO APPLY FOR* | | | | | | | | | | | | | | | |
| **Silver Lite Silver Gold African Safari**  **Please Print In Capital Letters Or Tick Where Applicable** | | | | | | | | | | | | | | | |
| Personal Details | | | |  | | |  | | | | |  | | | |
| Tittle |  | | | Date of Birth | | |  | | | | | I.D No | | |  |
| Surname |  | | | | | | | | | | | Sex: | | |  |
| First Name (s) |  | | | | | | | | | | | Payment Method………………………………………  **Proposed Premium…………………………..**  Premium Frequency……………..  Payment Dates……………………………………. | | | |
| Postal Address |  | | | | | | | | | | |
| Mobile # |  | | | | | | | | | | |
| Email: |  | | | | | | | | | | |
| Occupation |  | | | | | | | | | | |
| Employer Details |  | | | | | | | | | | | | | | |
| Destination Country |  | | | | Preferred Holiday Destination | | | | | |  | | | | |
| Total # of travellers | Adults | |  | CHLDN U12 | |  | | INFANT 0-2 |  | | | |  | | |
| No of nights |  | Mode of transport | | | | | |  | | | |  | | | |
| **for office use only** |  | | | | | | | | | SCN | | | |  | |
| SCN |  | | | | | | | | | SC Code | | | |  | |
| SC Code |  | | | | | | | | | PRP | | | |  | |
| PRP |  | | | | | | | | | Sharing % | | | |  | |
| **C.R.O.** | Horizon Date: | | | | | | | | | prescribed Premium: | | | | | |

Signed at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on the\_\_\_\_\_\_\_\_ Day of\_\_\_\_\_\_\_\_\_\_\_\_2018

Applicants Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_