

AFRICAN FARMERS ASSOCIATION OF SOUTH AFRICA

A SECTION 21 COMPANY 2011/007448/08



Membership Application Form

*For Office Use

Membership Number

I hereby apply to be admitted as an AFASA member under: _____ Province

A: PERSONAL INFORMATION

Surname

First Name

ID Number

Local Municipality

District Municipality

Postal Address

Postal Code

Name of Farm / Village

Physical Address of Farm / Village

Postal Code

Cell Number

Tel Number

Fax Number

Email Address

B: OTHER MEMBERSHIP & AFFILIATIONS

* Please tick in box & indicate details of membership or affiliation

	YES	NO	NAME / DETAILS
Do you belong to a study group?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you belong to a commodity association?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you belong to a local primary farmers' co-operative?	<input type="checkbox"/>	<input type="checkbox"/>	

C: FARMING INFORMATION

* Please tick in box & indicate size of land in appropriate spaces

Communal Land	<input type="checkbox"/>	Size of Land (ha)	
Leased Land	<input type="checkbox"/>	Size of Land (ha)	
Own Land	<input type="checkbox"/>	Size of Land (ha)	
Other Tenure	<input type="checkbox"/>	Size of Land (ha)	

D: FARM ENTERPRISES

* Please tick in appropriate box the commodity, enterprise(s) and size of your farm operation

Aquaculture	<input type="checkbox"/>					
		Description	Size (ha)	Description	Size (ha)	
Crop/Grain	<input type="checkbox"/>	Beans		Lucerne		
	<input type="checkbox"/>	Maize		Sorghum		
	<input type="checkbox"/>	Soya		Sugarcane		
	<input type="checkbox"/>	Sunflower		Wheat		
	<input type="checkbox"/>	Other		Specify		
			Description	Size (ha)		
Horticulture	<input type="checkbox"/>	Fruit		Specify		
	<input type="checkbox"/>	Vegetables		Specify		
	<input type="checkbox"/>	Flowers		Specify		
			Description	Number	Description	Number
Livestock	<input type="checkbox"/>	Beef		Dairy		

	Goats			Sheep		
	Other			Specify		
	Description					Number
Poultry						
	Description					Number
Piggery						
	Description					Number
Ostrich						
	Description					Number
Wool						
	Description					Number
Other (e.g. Game)						

E: ESTIMATED ANNUAL TURNOVER FROM FARMING OPERATIONS

* Please tick in appropriate box

< R 50 000 /annum		R 50 000 - R 100 000 /annum	
R 100 000 - R 500 000 /annum		> R 500 000 / annum	

F: ANNUAL MEMBERSHIP FEES

* Please tick in appropriate box

Communal or Commonage Land Annual Membership	R 300.00	
Own or Leased Land Annual Membership	R 1 500.00	
Affiliated Annual Membership	R150 000.00	
Commodity Annual Membership	R375 000.00	

G: PAYMENT INFORMATION & BANKING DETAILS

Name of Account	AFASA	Branch	Hillcrest Boulevard
Bank	Standard Bank	Branch Code	045 726
Account Number	012 127 191	Deposit Reference	YOUR ID NUMBER
IMPORTANT:	Please don't forget to write a reference number on your deposit slip, as it will not be possible to allocate payment with no reference		

Signature of Applicant _____

Date _____

- Please email this application form together with proof of payment to:
info@afasa.org.za
- Please submit the original to your Provincial Chairperson, with proof of payment

H: AFASA HEAD OFFICE CONTACT DETAILS



P O Box 248

Irene

0062



010 597 3673



www.afasa.org.za

MEMBERSHIP BENEFITS

- As a member of AFASA you will be entitled to vote, elect and be elected as leader of the association
- As a member of AFASA you will participate in influencing government policy in favour of the farming industry
- As a member of AFASA you will participate in any of its structures e.g. AFASA Commodity Chamber, AFASA Co-Operative Chamber, AFASA Women's League etc.
- As a member of AFASA you will benefit from its programmes which are aimed at providing access to Technical Support & Information; Agricultural Finance, Markets and Agri BEE initiatives
- In addition, you will benefit from dedicated loyalty programmes that are exclusive to members only
- As a member of AFASA you will receive FREE or DISCOUNTED AFASA Bulletin