

## **APPLICATION FOR MEMBERSHIP (SINGLE / FAMILY)**

(please print your name in full) hereby apply for membership of the Let's go Hiking - Namibia of Namibia and, if accepted, agree to abide by the Club's Constitution and to uphold the aims and principles contained therein.

1.....

I hereby absolve the Club and its members from any liability whatsoever for loss of damage to my person / family or property whilst engaged in Club activities.

Signature:	Date:
Signature of parent/guardian if under 18:	
PERSONAL DETAILS (Single / Main Member)	
Occupation:	ID no
Home Address:	Post Code
Postal Address if different from above:	Post Code
Tel: Home	Tel Work
Cell Phone: Emai	l address:
EMERGENCY CONTACT DETAILS	
Name of Next of Kin/close friend/ relative/colle	ague:
Relationship:	
Emergency contact number of Next of Kin/close f	riend/relative/colleague:
HIKING	
How did you hear about the Club?	
Brief details of previous hiking activities:	
MEDICAL	
Do you have any serious medical complaint? If ye	es, please provide brief details
OTHER	
Are you prepared to do any of the following? (plea	ase mark with an X)
Lead hikes	□ Offer transport to hikes □
Stand on Committee	Assist with catering
Write articles for the newsletter	Offer a venue for socials
Any other – please specify:	
Please complete in full and give ba	ck to the hike leader to sign and submit by email to:
<u>letsgohik</u>	ingnamibia@gmail.com

The aims of the Club are to promote hiking in Namibia, Hiking Destinations in Namibia & Namibia as a Hiking destination of choice in Africa.



## PERSONAL DETAILS:

PERSON INFO	FAMILY MEMBER 2	FAMILY MEMBER 3	FAMILY MEMBER 4	FAMILY MEMBER 5
Title				
First Name				
Last Name				
ID / Passport				
Number				

CONTACT INFO	FAMILY MEMBER 2	FAMILY MEMBER 3	FAMILY MEMBER 4	FAMILY MEMBER 5
Home Phone				
Cell Phone				
Work Phone				
Email Adress				

EMER INFO	FAMILY MEMBER 2	FAMILY MEMBER 3	FAMILY MEMBER 4	FAMILY MEMBER 5
Next of Kin				
Next of Kin Phone				
Medical Problems				
Medical Aid Provider				
Medical Aid Number				

	MEMBERSHIP FEES		
Annual Membership (from 1 Jan – 31 Dec 20	25)	N\$	С
Adults: N\$250,00 (p/			
Family: (Up to 5 Members) N\$500,00 (p/	'n/a)		
Children under 12 years: N\$ 125,00 (	p/f/a)		
AMOUNT DUE	TOTAL		
	Banking details:		
Name of Acc: Bank & Branch: Account No.:	Let's go Hiking - Namibia Bank Windhoek (Maerua Mall) 8040366697		
	OTHER INFORMATION		

Please email this form to: <a href="mailto:letsgohikingnamibia@gmail.com">letsgohikingnamibia@gmail.com</a>