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MEMBERSHIP RENEWAL / APPLICATION FOR MEMBERSHIP

Dr/Mr/Mrs/ Miss: _____ First Name: _____

Address: _____ Phone no: _____

_____ Cell: _____

Email: _____

New member _____ Renewal: _____

Signature: _____ Date: _____

Knysna Ratepayers Association
First National Bank: 62801324500
Branch code: 210214
* Please put name and street as reference

Annual Subscription Rates
Individual / Family: R120-00
B&B, Guest houses etc: R150
Businesses: R250-00