



# SOUTH AFRICAN LEGION

(CAPE TOWN BRANCH)  
PBO 93000796

## APPLICATION FOR MEMBERSHIP

Title ..... Initials ..... Surname .....

First name/s ..... Date of birth .....

Identity number..... Post nominal titles .....

Force number:..... Unit .....

Date attested ..... Date discharged .....

How did you get to know about the Legion?.....

.....

Brief service history/tell us a bit about yourself .....

.....

.....

Reason for joining .....

.....

### Contact details

Phone (h) ..... Phone (w) .....

Mobile ..... Email .....

Residential/Postal Address .....

.....

..... Postal Code .....

**Membership is R140,00 p.a. and runs from 1 April to 31 March**

**PLEASE DO NOT PAY UNTIL YOU RECEIVE AN INVOICE**

**All other payments/donations can be made to:**

Standard Bank Rondebosch Branch code 025009 Account SA Legion  
Account number 070149291  
Please use your name as the reference

Please return the completed application form to [member@salegion.co.za](mailto:member@salegion.co.za)  
or drop it off or mail it to the postal address below

Date ..... Signature .....

**Address:** Lower Nursery Road, Rosebank **Postal Address:** PO Box 368, Rondebosch, 7701  
[www.salegion.co.za](http://www.salegion.co.za) **Telephone No:** 27 21 689 9771 **Fax No:** 27 21 685 6254