MINORITY FRONT MEMBERSHIP APPLICATION

1.	Are you a registered voter?								
Personal Details									
2.	ID Number								
3.	Surname								
4.	First Names								
5.	Title		Age		Gender	M		F	
Address									
6.	House/Flat No.								
7.	Road Name								
8.	Suburb								
9.	City/Town								
10.	Ward No.								
11.	Municipality								
Contact Details									
12.	Tel (W)								
13.	Tel (H)								
14.	Cell								
15.	Email								
16.	Fax								
Previous Party Membership (if you were a member of another party, list full details below)									
17.	Name of Party								
18.	Date of resignation		Reason for resignation (with affidavit)						
Declaration									

I the undersigned hereby declare:

1. That I agree to be bound by the Constitution, Code of Conduct and Rules of the Minority Front
2. Declare that I am not a member of any other political party or political organisation.

_____ _____

Signature (applicant) **Date**

FOR OFFICE USE ONLY					
a.	Membership Approved		d.	Membership Fees Paid	
b.	Membership No.		e.	Amount Paid (once off)	**R10.00**
c.	Assigned to Office		f.	Name & Signature of Staff	