



SAPCO- South African People's Civic Organization

MEMBERSHIP APPLICATION FORM

WARD : _____.

Surname _____ ID No _____

Name _____ Gender _____

Occupation _____ Home Language _____

Home
address _____

Region _____ National _____

Province _____ Postal Code _____

Home Tel _____ Cell No _____

Subscription Amount _____ Date Joining/ Renewal _____

Declaration I solemnly declare that I am on 18yrs and above category and Joining /Renewing SAPCO membership voluntarily without motives of personal gains or material advantage. I will abide by the aims and objections of SAPCO as set in the Constitution. I will abide by the policies and Resolutions of SAPCO structures and will participate in the life of the organization as a loyal, active and disciplined member

Signature _____ Date _____

Membership No. _____

Branch Secretary/Organizer Signature _____

Date _____

VD Name _____ VD No _____

FOUNDER MEMBERS

President: Loyiso Toyiya **Deputy President:** Manene Tabane **National Organizer:** Mbuyiseni H Galela **Project Management :** Zandisile J Tunce

BASED IN : 11 Rendell road Wadeville Germiston 1428