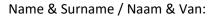
BETHLEHEM MARATHON KLUB

Please complete the form below & return to bhmmarathon@gmail.com



ID no:

Cell Nr:

Epos / Email:

Ek verklaar dat ek op eie risiko hardloop en die klub vrywaar van enige aanspreeklikheid vir besering of verlies / I declare that I run at my own risk and indemnify the club of any responsibility for injuries or loss.

Handtekening / Signature:

Datum / Date:

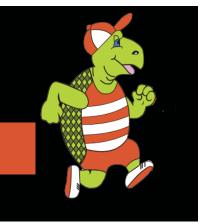
Payment Details / Betalings besonderhede:

The membership fee for 2025 is R450-00 / Die lidmaatskapfooi vir 2025 is R450-00

BETHLEHEM MARATHON KLUB ABSA Bank 502233 Account number: 712359757 Email proof of payment to: bhmmarathon@gmail.com

Please note that this form and the official ASA form must be submitted by 22 November 2024, and proof of payment received not later than 31 January 2025.

www.bethlehemmarathonklub.com



ASA ATHLETICS SOUTH AFRICA

2025 ASA PERMANENT LICENCE APPLICATION FORM

A licence number will only be issued to the club, by the province, when this form is fully and correctly completed by the applicant, verified by the club, and accompanied by payment in full. The club/province may use an electronic registration system, with the form electronically signed and EFT payments made, provided the electronic system is aligned with the ASA license registration application system.

I am a: Mark all activities relevant	Athlete	Coach	Technical Official	Office Bearer	
Discipline: Mark all activities relavant	Track & Field	Road Running	Off-Road Running	Race Walking	

Demographics - SRSA Requirement									Black					Coloured					Ind	ian				White						
Age category - SRSA Requirement								Sen	ior+	or+				Junior				Hig	h Scl	hool				Primary Schoo			ool			
Gender: Male Fema						le Date of				of Birth (YYYY-MM-DD)						•					-			-						
Title (Mr/Ms/Dr/ect.)									Init	ials																-				
Surname																														
First N	lan	ne																												
Туре о	of I	de	ntifi	catio	on D	ocur	nen	t	ID E	Book	ook/Card				Birth Certificate						Passport			Refugee Permit						
														Nui	Number															
					-	1	1	T	-	-		-	-	1	1	-	-	_	-	-	1	1	1	-	-	-	-	1		
ASA Province																														
2024			-	-	er						+ + + +				2025 Licence Number															
Club N	lan	ne	(in f	ull)																										<u> </u>
Residential Address - Domicilium Rule																														
Reside	Ins	lai	Add	ress	- D0	I	liiun	n ku		1																				
	+																													
	+																													
																								Coc	le le					
Postal Address - Domicilium Rule								e																						
															1															
																								Coc	le					
Tel/Cell phone number					1 st											2 nd														
Email address																														
Occupation																														
			-						-	-		-					-		-											
Next o	of k	(in		Nar	ne																									
Tel/Ce	ell k	bho	ne r	numl	ber				1 st											2 nd										
DECLARATION: I declare that I am a bona fide athlete/coach/technical official/office bearer. I confirm that all the information provided on this application is true and correct. I understand that my participation in an athletics related event is subject to the ASA Constitution, its rules and regulations. I understand that this licence can be retracted should I violate the ASA Constitution, its rules and regulations. I hereby accept that I participate in any event of ASA and its members, sponsors and organisers of any event against all and any action of whatever nature which may arise out of my participation and I agree that it is my responsibility to be medically fit to compete in any event. I understand that my information may be shared with ASA partners, in accordance with the ASA Privacy Policy. I understand that if I am a minor, my parent and/or legal guardian understands the nature of the athletic activity, approve of the declaration above, and sign it on my behalf.														l t f																
Date: S							Signature applicant:																							
Date:								Signature of Parent/Guardian (Younger than 18yrs):																						
	С	lub	l co	onfirm	n th	at th	e ab	ove	info	mat	ion i	is coi	rect	; the	ath	lete i	is re	giste	red	to no	o oth	er cl	ub; a	and	dom	icile	is co	rrec	i.	
Date:									Sigi	natu	re o	f Clu	b Re	epres	enta	ative	:													

Province: I confirm that the club is affilliated to the province; and the domicile of the club and application is correct.