

MEMBERSHIP RENEWAL / APPLICATION FORM



Attach your passport photo here if not submitted electronically. OR E-mail us your Digital Head & Shoulders Photo with your ID Number in the subject line.	Official Use Only
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E-Mail or MMS this form to support@iamnotamistake.co.za

Please supply all relevant information and Mark all appropriate boxes with X

PERSONAL & CONTACT DETAILS

First Name		Middle Name	Surname	
Gender: Male <input type="checkbox"/>	Female <input type="checkbox"/>	ID Number:	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Residential Address: _____				
City/Town/Village _____			Postal Code: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Tel 1: _____		Tel 2: _____		E-Mail: _____
In case of an Emergency, phone next of kin			Name: _____	
Relation to Member (e.g. Parent, Spouse, Friend) _____			Tel No: _____	



PLEASE TELL US A LITTLE ABOUT YOURSELF (This Is Required For Statistical Reasons And Foundation Profile Purposes)

Date of Birth: _____ Place of Birth: _____

Marital Status: Single Married Divorced Widowed How many Children? _____
 Living Partner

Race: Black: Coloured: Indian: White: Other: Specify: _____

Home Language: _____ Religion: _____

Last Institution of Learning Attended: _____ What Year? _____

Area of Expertise/Experience: _____ Years of Expertise/Experience: _____

Occupation: _____ Employer: _____

Permanent: Contract: Temp: Unemployed: Current Position: _____

MEMBERSHIP FEES – Tick the Appropriate Box. You Can Also Pay for More Than 1 Year Membership in Advance

	Monthly	Donation	Donation	ORDER:
Various Projects for Donations:				
1. Safehouses	R200 <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	
2. Protect the Farming Community	<input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	
3. Training of Councillors	R300 <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	
4. Expanding of Security Department	<input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	
5. General assistance for Mental Therapy.	R400 <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	
6. SECURITY	<input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	
Please be so kind as to reflect next to your Donation the cause that you would like your Donation to go to.	R500 <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	
	R1 000 <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	
I am Not a Mistake Foundation (Pty) Ltd, will issue you with a confirmation donation letter once the funds have cleared.		R	R	
Membership				
I am Not a Mistake Foundation (Pty) Ltd, will issue you with a membership card, reflecting your membership number.				

