



ROSEDALE SERVICE CENTRE

APPLICATION FOR MEMBERSHIP

NAME : Mr/Mrs/Ms :

ADDRESS :

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.....**POSTAL CODE**

ID NUMBER : **Contact No :**

EMAIL ADDRESS :

I declare that I am a senior citizen over the age of 60, (unless on pension) and I shall abide by the rules of the Service Centre.

Signed :

Date :

Note :

- A copy of the application form is available electronically.
- Currently the subscription is R48.00 per annum, per person
- Cheques should be made out to SA LEGION
- EFTs may be paid to : Account :SA Legion; Bank : Standard Bank; Branch : Cape Town; Branch Code:020 009; Bank Account No : 070149291: Reference (Name) + Service Centre

Address: Lower Nursery Road, Rosebank **Postal Address:** P.O.Box 368, Rondebosch, 7701

Email: salegion@mweb.co.za **Telephone No:** 27 21 685 1515 **Fax No:** 27 21 686 2942