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Friends of the Haenertsburg Grasslands

**Application for Membership** **2024**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Membership Options** | | | | | | | Select |
| Individual | | • R150 per annum | | | | |  |
| Family (incl. children under 18) | | • R300 per annum | | | | |  |
| Pensioner/Student/Under 18 | | • R70 per annum | | | | |  |
|  |  | | | | | | |
| **Personal Details** | | | | | | | |
| First Name | Click here to enter text. | | | | | | |
| Last Name | Click here to enter text. | | | | | | |
| Family Members | Click here to enter text. | | | | | | |
| (if also joining) | Click here to enter text. | | | | | | |
|  | Click here to enter text. | | | | | | |
|  | Click here to enter text. | | | | | | |
| Cell | Click here to enter text. | | Join FroHG WhatsApp Group | | | |  |
| Postal Address | Click here to enter text. | | |  | Postal Code | Click | |
| Home Address | Click here to enter text. | | | | | | |
|  | Click here to enter text. | | | | | | |
| E-mail | Click here to enter text. | | | | | | |
| Date | Click here to enter text. | | | | | | |

* Please e-mail the completed form to [frohgonline@gmail.com](mailto:frohgonline@gmail.com)
* You will receive an invoice indicating FroHG’s bank account details and your FroHG membership number, which is also your reference number.
* Once proof of payment is received, you will receive a certificate of membership.

Thank you for joining FroHG!

www.frohg.org