



SOUTH AFRICAN PISTOL ASSOCIATION
Accreditation Number 1300056 A Member of SASSF
PERSONAL DETAILS FOR 2011

ALL AFFILIATED MEMBERS ARE REQUESTED TO COMPLETE ALL FIELDS ON THE PERSONAL DETAILS FORM ANNUALLY, TO ENSURE THAT THE SAPA OFFICE RECORDS ARE CORRECT AND UPDATED. **PLEASE COMPLETE ALL INFORMATION ON THE FORM** AND E-MAIL TO YOUR CLUB SECRETARY FOR ONWARD TRANSMISSION TO SAPA.

ALL NEW MEMBERS TO COMPLETE THIS FORM, AND INCLUDE 2 COLOUR PASSPORT PHOTO'S (PRINT NAME AND ID NUMER ON THE REVERSE SIDE OF PHOTO'S) PLUS A CERTIFIED COPY OF THEIR ID AND POST/HAND TO THEIR CLUB SECRETARY TOGETHER WITH THEIR ANNUAL AFFILIATION PAYMENT.

SURNAME: TITLE: ETHNICITY:

(Ethnicity: B for BLACK, C for COLOURED, I for INDIAN and W for WHITE as REQUIRED BY SASCOC)

FIRST NAMES: KNOWN NAME:

SCHOLAR OR STUDENT: GENDER:

RESIDENTIAL ADDRESS:

POSTAL ADDRESS:

POSTAL CODE: SAPA NO:

IDENTITY NUMBER: PASSPORT NO:

TELEPHONE NO'S: HOME: WORK:

FAX: CELL:

E-MAIL ADDRESS:

HOME CLUB:

PROVINCE:

ACHIEVEMENTS: FULL PROTEA COLOURS (YEAR) JUNIOR COLOURS (YEAR)

PROVINCIAL COLOURS (YEAR)

OTHER (YEAR)

AFFILIATION: FULL MEMBER OR CLUB MEMBER

FIRST YEAR AFFILIATED:

SIGNED BY MEMBER:

CURRENT GRADINGS TO BE CIRCLED

PLEASE COMPLETE GRADINGS IN RED

	EVENT-ISSF	GRADE					EVENT- NPA/PPC	GRADE					
		B	S	G	M			B	S	G	M	HM	
1	50 YARDS					11	1500 PISTOL						
2	CENTRE FIRE					12	1500 REVOLVER						
3	FREE PISTOL					13	CARRY GUN						
4	L/AIR PISTOL					14	DISTINGUISHED PISTOL						
5	L 25m PISTOL					15	DISTINGUISHED REVOLVER						
6	M/AIR PISTOL					16	POCKET PISTOL						
7	ORF (Short)					17	POLICE PISTOL A						
8	RAPID FIRE (Long)					18	POLICE PISTOL B						
9	SPORT PISTOL					19	POLICE PISTOL II						
10	STANDARD PISTOL					20	POLICE PISTOL OPTICAL						
						21	SERVICE PISTOL A						
						22	SERVICE PISTOL B						
						23	SERVICE REVOLVER						
						24	STOCK SEMI AUTO						
						25	SUPER MAGNUM						
						26	SERVICE PISTOL OPTICAL						
						27	OPEN MATCH						
						28	OFF DUTY REVOLVER (6)						
						29	OFF DUTY REVOLVER (5)						

SIGNED BY MEMBER:
DATE:

AFFILIATION CARDS WILL ONLY BE ISSUED IN RESPECT OF DIRECT DEPOSITS PAID INTO THE SAPA BANK ACCOUNT BY MEMBERS, ON RECEIPT OF WRITTEN APPROVAL FROM THEIR PROVINCES.

ALL NEW AFFILIATIONS TO BE SUBSTANTIATED BY THE REQUIRED DOCUMENTATION STATED ABOVE, AND MUST BE SUBMITTED TO THE MEMBER'S CLUB, TO ENABLE THE ISSUE OF AFFILIATION CARDS.

USEFUL SAPA INFORMATION

EXECUTIVE OFFICER
Mathilda Rautenbach
P.O Box 15278, Sinoville 0129
TEL & FAX: 012 543 2786

SAPA Bank Details:-
Bank: ABSA
Branch: 501-045 Kolonnade, Pta
Account: 010 914 805 70