



SOUTH AFRICAN FRUIT JUICE ASSOCIATION

Registered in terms of Non-Profit Organisations Act, 1997 (Act 71 of 1997)

Reg. No. 122-886

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APPLICATION FOR ASSOCIATE MEMBERSHIP

Please type details in space provided

Name of company:	
Business description:	
Company representative: Position: Cell: Email:	
Company registration number:	
VAT Number:	
Postal address:	
Company contact details Tel: Fax: E-mail: Website reference:	

I, _____ (name & surname) am authorised on behalf of the company in terms of the attached Board resolution to make application for associate membership of the Association, and understand that the application will only be finally accepted once the following procedural steps have been met:

- A signed copy of the attached Code of Ethics Statement must be signed by the most senior Manager of the company, and returned with the application;
- A copy of the VAT certificate is received with the application;
- On receipt of the application form and supporting schedules an invoice will be issued to the Applicant for the Subscription Fees and this amount must be deposited in the Bank Account shown on the invoice;
- A formal notice of acceptance as an Associate Member of the Association will be issued to the named Representative to complete the application process, and in due course a Certificate will be issued for display at the Associate Member's place of business.

Signed at _____ on the _____ day of _____ 20 ____

Name: _____ Position: _____

Signature: _____