FOR OFFICE USE:
Authorised by: CF
Doc. no: 188E17

MEMBERSHIP FORM

REGISTER BY TELEPHONE, FAX, E-MAIL OR POST

Tel: (012) 660-2282
Fax: (086) 719-8888
E-mail address: erika@saconsult.co.za
Postal address: Private Bag X117, Centurion, 0046

Please register me as a member of Prestige Millionaires Club for a year, and renew my membership annually at the prevailing rate unless I cancel. Please send me the latest Club report **immediately**, as well as my membership documents and my confidential telephone and fax numbers for the free advisory service.

DATE: ..... SIGNATURE: .....

NAME AND SURNAME: .....

POSTAL ADDRESS: .....

..... CELL NO.: .....

E-MAIL ADDRESS: .....

I would like to pay the Club membership fee as follows:

Debit my cheque account / savings account with the monthly fee of R414.

Name of bank: .....

Account number: .....

Branch name: .....

Branch code: .....

Indicate your type of account: ☐ Cheque ☐ Savings ☐ Transmission

If you prefer to pay the R414 monthly by credit card, please call Erika on (012) 660-2282.