2024 ASA PERMANENT LICENCE APPLICATION FORM

A licence number will only be issued to the club, by the province, when this form is fully and correctly completed by the applicant, verified by the club, and accompanied by payment in full. The club/province may use an electronic registration system, with the form electronically signed and EFT payments made, provided the electronic system is aligned with the ASA

am a: Mark all activities relevant Athlete													Coach					Technical Official						Office Bearer						
Discipline: Mark all activities relavant Track & Field											d			ıd Ru	ınnir	ng		Off-Road Running						Race Walking						
Demographics - SRSA Requirement Black															Coloured					Indian						White				
Age category - SRSA Requirement										Senior+				Junior					High School					Primary School				ool		
Gende	r:	Ma	le		Female			Date of Birt				h (YYYY-MM-DD)									1			-						
Title (Mr/Ms/Dr/ect.)									Initials																					
Surname																														
First Name																														
Type o	ocument ID			ID E	Book/Card					Birth Certificate					Passport				Ref	fugee Permit										
Number																														
ASA Pr				1		1		1																						
2023 Licence Number			er										202	4 Lic	enc	e Nu	mbe	er												
Club N																														
Reside	ntial	Add	ress	- Do	mic	iliun	n Ru	le																						
																													<u> </u>	
	-																													
_ Postal Address - Domici						Dul																	Cod	е						
Postar	Addi	ess -	וטט	nicii	lum	Kui	e I	1	1																					
	-																													
																							Cod	le						
Tel/Cell phone number							1 st											2 nd												
Email address																														
Occupation																														
Next of Kin Name				_																										
Tel/Cell phone number								1 st											2 nd											
DECLARATION: I declare that I am a bona fide athlete/coach/technical official/office bearer. I confirm that all the information provided on this application is true and correct. I understand that my participation in an athletics related event is subject to the ASA Constitution, its rules and regulations. I understand that this licence can be retracted should I violate the ASA Constitution, its rules and regulations. I hereby accept that I participate in any event of ASA and its members entirely at my own risk. I indemnify ASA and its members, sponsors and organisers of any event against all and any action of whatever nature which may arise out of my participation and I agree that it is my responsibility to be medically fit to compete in any event. I understand that my information may be shared with ASA partners, in accordance with the ASA Privacy Policy. I understand that if I am a minor, my parent and/or legal guardian understands the nature of the athletic activity, approve of the declaration above, and sign it on my behalf.																														
Date: Signature applicant:																														
Date: Signature of Parent/Guardian (Younger than 18yrs):																														
Club: I confirm that the above information is correct; the athlete is registered to no other club; and domicile is correct.																														
Date: Signature of Club Representative:																														
	Prov	vince	· I cc	nfir	m th	at th	ne cl	uh is	əffi	lliate	ad to	the	nro	ince	· an	d the	dor	nicil	Δ of	the o	·luh	and	annl	icati	on is	cor	rect			

Signature and stamp of the Province: Date: