

**Proudly Three Rivers  
Membership Form**

Name		
Surname		
Cell Phone Number		
Landline Number		
Email Address		
Physical Address		
Would you like to receive communication from us ?	YES	NO
Remarks/ Comments	Signature:	
I would like to make a monthly contribution of R_____ pm.		

For admin purposes please use the following e-mail address: info@proudly3rivers or fax no 086 502 0857

**Thank you for your support!**