

MEMBERSHIP APPLICATION FORM



NDSASA HEAD OFFICE
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I/We (Name of the driving school) hereby apply to become a member of the National driving school Association of South Africa (NDSASA).....

CONTACT PERSON: (Full Names & Surname).....

Contact Number

DETAILS OF THE DRIVING SCHOOL

Office address.....

Tel no..... fax no email.....

Area of Operation.....

Company registration (CIPC).....

Number of Car's.....

Car Registrations

1.....2.....3.....

4.....5.....6.....

Membership fee (*Membership fee, you get 1 sticker for free*) R250/R750 PAID YES / NO

Name of directors /partners

12.....

3.....4.....

Number of employees/members.....

SIGNATURE..... DATE

BANKING DETAILS

Bank Name: Capitec Business

SWIFT Address: CABLZAJJ

Branch Name: Sandton

Branch Code: 450105

Account Name: National Driving School Association Of South Africa Npc

Account Type: Current Account

Account Number: 1051419557

Entity Registration Number: 2020/571141/08

Proof of payment should be send to admin@ndsasa.org