



Institute of Environment and Recreation Management

2012 Membership Application Form: IERM Authority Membership

Benefits of joining the Association:

- Invitation to and participation in all branch meetings
- Invitation to and participation in the Annual Convention at a reduced fee
- Monthly e-bulletin sent via email
- Representation on other National Bodies

Please select the appropriate membership subscription category:

Authority Membership

- **Metropolitan Municipalities**
- **Aspirant Metropolitan Municipalities**
- **City Municipalities**
- **Other Municipalities**

X

	R 8,670.00
	R 5,775.00
	R 2,895.00
	R 1,155.00

Authority Members must be represented by an Official Member and by a Politician/Board Management Member.

Organisation Name: _____

IERM Branch: Please indicate (choose ONE) the branch your Organisation belongs to:

Western Cape		Kwa-Zulu Natal		Mpumalanga		Eastern Cape	
North West		Northern Cape		Free State		Limpopo	
Gauteng		International					

1. Official Member:

Title: _____ First Name: _____ Surname: _____

Postal Address: _____

Tel: () _____ Fax: () _____

Cell: _____ Email: _____

2. Politician/Board Management Member:

Title: _____ First Name: _____ Surname: _____

Postal Address: _____

Tel: () _____ Fax: () _____

Cell: _____ Email: _____

Your Undertaking can also have, at no extra charge, a number of Branch Members that are staff members in your employment.

Complete the section below to inform us of these individuals that need to be listed on our database:

3. **Branch Member 1:**

Title: _____ First Name: _____ Surname: _____

Postal Address: _____

Tel: () _____ Fax: () _____

Cell: _____ Email: _____

Branch Member 2:

Title: _____ First Name: _____ Surname: _____

Postal Address: _____

Tel: () _____ Fax: () _____

Cell: _____ Email: _____

Branch Member 3:

Title: _____ First Name: _____ Surname: _____

Postal Address: _____

Tel: () _____ Fax: () _____

Cell: _____ Email: _____

Branch Member 4:

Title: _____ First Name: _____ Surname: _____

Postal Address: _____

Tel: () _____ Fax: () _____

Cell: _____ Email: _____

If your Undertaking has more Branch Members than provided for, attach a list of the additional members with their details as listed above.

For more information contact the IERM Secretariat on (011) 789 1384

Please complete this form and fax it to (011) 789 2116.

An invoice for the Annual Subscription fees will be emailed to the Official Representative.