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Application for Membership

FOR OFFICE
USE. DO NOT
PASTE YOUR
PHOTO HERE
PLEASE

Personal Details

JHBMemNo: (to be assigned)

Attended Prospective Members Talk Date: (fill in the date please)

PLEASE PRINT CLEARLY, AND USE A BLACK PEN

Surname		First Names	
ID No		Date of Birth	
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>	Marital Status	
Occupation		Home Language	

CONTACT DETAILS

Your Home Address 1		Email address Please print clearly	
2		Mobile Number	
3			
Post Code			
Country			
		<i>In case of an Emergency, Contact Details</i>	
		Full Name	
		Relationship	
		Tel No	

I will notify the administrator in writing of any changes to the above details

Brief description of mountaineering experience (if any):

Give the name of any Section of the Mountain Club of which you are at present a member:

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Office Use:

(*QR code on page 4)

Date Received		EFT <input type="checkbox"/>	SagePay <input type="checkbox"/>
Fee Received (Amount)		By (name)	
Member Card Done	<input type="checkbox"/>		

Captured: / /2025



**THE MOUNTAIN CLUB OF SOUTH AFRICA
JOHANNESBURG SECTION**

73 Republic Road (entrance 46 4th Ave South
Fontainebleau 2032 • Johannesburg
Republic of South Africa
Telephone: (027) 061 461 8259
Office hours: 12h00 to 20h00 Mon & Thurs

**Indemnity form for members, prospective members, guests/client of commercial operators
and persons participating in activities organised by or on behalf of the MCSA, Johannesburg Section**

PART 1: to be completed by the member / guest / participant/client.

I, the undersigned.....(full names)
Residing at (full residential address)
having been born on..... (full date of birth)
and duly assisted herein by my guardian if I am a minor, do hereby agree and undertake in favour of the Mountain Club of South Africa, its national, sectional and local committees, members, servants and agents (herein referred to as "the Club") that:

1. I am aware of the dangers of personal injury or death inherent in mountaineering, hiking, scrambling, bouldering, abseiling, rock climbing and activities incidental thereto to which I may be exposed as a result of my participation in Club activities and activities organized by or on behalf of the Club and I understand and accept that my participation in any such activities is at my own risk for which I accept all responsibility.
2. I, accordingly, hereby irrevocably waive, relinquish and abandon all claims of any nature whatsoever which I may have against the Club or any of its members, or meet leaders, or the owners/occupiers of the land, arising out of my participation in Club activities and activities organized by or on behalf of the Club, for loss or damage to property, personal injury or loss of life, howsoever caused and irrespective of whether the loss or damage occurred as a result of negligence. I further indemnify the Club, its members and meet leaders and the owners/occupiers of the land in respect of any claim against the Club, arising out of my participation in the activities of the Club and agree that I will be liable for all damage caused by lighting of fires, or negligence of myself or those for whom I am responsible.
3. Should I be injured whilst participating in club activities or activities organized by or on behalf of the Club, I hereby appoint and authorise the meet leader (or such other person who is co-ordinating the activity on behalf of the club) to consent to my undergoing surgical or other medical treatment which in the opinion of the attending medical practitioner is necessary. I further undertake to pay the cost of such treatment and/or any rescue which may be required.
4. I agree that the terms and conditions contained herein will remain binding upon me, my heirs, executors, administrators and assigns.

SIGNED AT _____ ON THIS _____ DAY OF _____ 20____ Signature _____

PART 2 : only to be completed and signed if person in part 1 is a minor

DULY ASSISTED / REPRESENTED * BY..... (FULL NAME) IN MY CAPACITY AS **GUARDIAN OF THE ABOVEMENTIONED MINOR**

1. I confirm that the minor referred to in Part 1 hereof is participating in Club activities with my consent and that I am aware of the dangers of personal injury or death inherent in mountaineering, hiking, scrambling, bouldering, abseiling, rock climbing and activities incidental thereto to which the minor may be exposed as a result of his/her participation in Club activities and activities organized by or on behalf of the Club and I understand and accept that his/her participation in any such activities is at "own risk" for which I accept all responsibility.
2. I, accordingly, hereby irrevocably waive, relinquish and abandon all claims of any nature whatsoever which I or the minor, may have against the Club or any of its members or meet leaders, or the owners/occupiers of the land, arising out of the minor's participation in club activities and activities organized by or on behalf of the Club, for loss or damage to property, personal injury or loss of life, howsoever caused and irrespective of whether the loss or damage occurred as a result of negligence. I hereby agree to indemnify the Club, its members, meet leaders, and the owners/occupiers of the land, in respect of any claims arising out of the minor's participation in the activities of the Club, and that I will be liable for all damage caused by lightning of fires, or negligence of the minor or those for whom I am responsible.
3. Should the minor be injured whilst participating in club activities or activities organized by or on behalf of the club, I hereby appoint and authorise the meet leader (or such other person who is co-ordinating the activity on behalf of the club) to consent to the minor undergoing surgical or other medical treatment which in the opinion of the attending medical practitioner is necessary. I further undertake to pay the cost of such treatment and/or any rescue which may be required
4. I agree that the terms and conditions contained herein will remain binding upon me, my heirs, executors, administrators and assigns.

SIGNED AT _____ ON THIS _____ DAY OF _____ 20____ GUARDIAN (signature) _____

IN THE PRESENCE OF THE UNDERSIGNED WITNESSES

1. Name _____ Signature _____
2. Name _____ Signature _____

***Note: Only Part 1 is to be completed if the members / guest / participant is over 18 years of age.**

Part 1 and Part 2 are to be completed where the member / guest / participant is between 7 and 18 years of age

I have become acquainted with the MCSA – Johannesburg Section, and in so doing now desire to become a member of the MCSA of the following category: **NOTE: MEMBERSHIP FEES ARE DISCOUNTED BY 50% WITH EFFECT FROM 1 JULY. . .**

Category	2025 Fee (R)	
Joining Fee* (deferred till age 25)	400.00	Per person / once-off pmnt
Ordinary Member	1100.00	One person 25-64
Ordinary Members (Partnership)	1700.00	Two people 25-64
Country Member (if you live more than 110km from office)	750.00	One person 25-64
Country Member (Partnership) (ditto)	960.00	Two people 25-64
Senior Member (65 years and older)	490.00	One person 65+
Senior Married (65 years and older)	790.00	Two people 65+
Youth Member* (between 18 and 25 yrs)	490.00	
Junior Member* (up to 17 yrs)	150.00	
Donation:		
Total		

1. Membership fees are due and payable at the beginning of each year.
2. The joining fee and the annual membership fee will be refunded if an individual's application for membership is unsuccessful
3. Joining Fee may be waived if proof of current membership of another Section is provided + a letter of good standing.

I confirm that I have read the Land & Access information sent to me and understand the sensitivities about following the guidelines. _____ (initial)

If elected, I agree to be bound by the Constitution (issued on acceptance) and the Rules of the Section: to do all in my power to promote the interest of the Club: to help control kloofs and other fixed property owned by the Club: and, in particular, to safeguard and develop the relationship the Club has with landowners and farmers arising from servitudes or other access agreements. _____ (initial)

I understand and accept that all mountaineering activities, whether at club meets or otherwise, will be carried on by me entirely at my own risk. _____ (initial)

I will conduct myself in terms of the Members' CODE OF CONDUCT which I have read. _____ (initial)

NB: The MCSA communicates with its members via a weekly Newsletter. Important information, especially about access and changes to access is communicated in this way. I accept this and undertake that I will read these responsibly. I also agree to my name being added to the Mailing List and understand that my agreement is in terms of the POPI Act. _____ (initial)

Signature of Applicant		Date	
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MCSA confirms that its mailing list is not shared with any outside body and is used by the JHB Section to communicate with its members.

Please indicate which services you would like to participate in as a club member: -

Area		Specifics if appropriate
Social Events		
Hiking		
Sport Climbing		
Traditional Climbing		
Kloofing		
Conservation		
Community (Outreach)		
Land-Patrol		
Recruitment of Members		
Legal		
Land and Access		
Training		
Search & Rescue		
Meetleader		Preferred Area/s
Youth Leader		
Presentations		
Website		
Social Media		
Other		

Other Suggestions:

I heard about the MCSA through:

Internet Word of Mouth Climbing Course

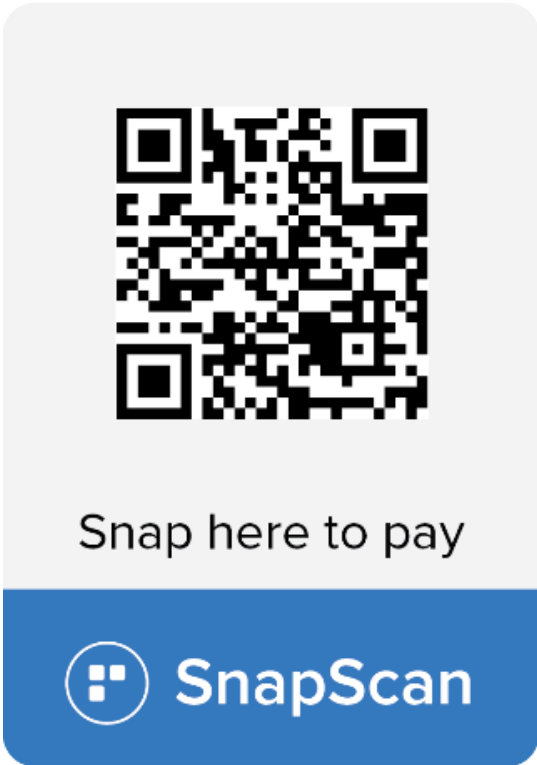
Other Please specify

Johannesburg Section Contact Details:

Tel: 061 461 8259
 eMail (General): admin@jhb.mcsa.org.za

Banking Details for EFT:

Name: Mountain Club of SA Johannesburg Section.
 NEDBANK KILLARNEY, branch code: 191605
 Current Acc No: 1916 044 239



If paying via SnapScan, please remember to include your surname/reason for payment (eg: subs; new member)