

# KENT PARK TAVERNERS

**Please return completed form to:**  
Mr Richard Gwilt  
Email : richardgwilt15@yahoo.co.uk  
Cell : 076 480 8861

**KPT Office:**  
Amanda A Pyne-James  
Email : [amanda@kentparktaverners.co.za](mailto:amanda@kentparktaverners.co.za)  
Tel : +27 83 252 9801



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## APPLICATION FOR MEMBERSHIP 2025/26

FIRST NAME/S : \_\_\_\_\_

SURNAME : \_\_\_\_\_

IDENTITY NUMBER : \_\_\_\_\_

POSTAL ADDRESS : \_\_\_\_\_

\_\_\_\_\_ POSTAL CODE \_\_\_\_\_

E-MAIL ADDRESS : \_\_\_\_\_

TELEPHONE CELL : \_\_\_\_\_ WORK : \_\_\_\_\_

I hereby agree to pay the sum of R1,900.00 (Entrance Fee of R1,000.00 and Annual Subscription of R900.00) upon being elected a member of the Kent Park Taverners. I agree to abide by and be subject to the rules of the Kent Park Taverners, as laid down in the Constitution thereof.

SIGNATURE : \_\_\_\_\_ DATE : \_\_\_\_\_

**INTRODUCED BY** : \_\_\_\_\_

\_\_\_\_\_  
**(Initials and Surname)**

\_\_\_\_\_  
**SIGNATURE**

Please note that the Constitution requires that the applicant must be introduced to two Committee members who will endorse the application.

**COMMITTEE MEMBERS** :

1. \_\_\_\_\_

2. \_\_\_\_\_