## **Gauteng Fencing Association**



## **GFA Registration Application 2025**

Please tick the a	pproprام <u>د</u>	ıate	box and fill i	n all the re	levar	it inforn	natic	on:		
Fencer:	Coach:						A	dministrator:		
Referee:			Referee: FIE Qualified:					eferee: ationally qualified:		
First Name:					La	st Nam	ie:			
Gender:				Nationality:						
Date of Birth: dd/m		dd/mm/yyy	/y	ID Copy Subi		Subi	mitted:	Yes	No	
									•	
Race*:				Right to Vote (18 or above):			Yes	No		
* This information is	not aske	d by	GFA - it is com	npulsory for S	SASCO	OC and tl	he De	epartment of Sport	.1	
Fencer's Ema Postal Addres Fencer (if no is available):	ss of									
Cellphone No:			Home N	o:			Work No:			
Primary Fend	ing Clul	o:								
Secondary Fe	encing (	Club	(if applicable	e):						
Indemnity Form 2025 Submitted:		bmitted:	Yes			No				
Residential Address of Fencer										



Age	Pupi (U11)			Benjamin (U13):			Minim (U15):				
Group:	Cadet (U17)			Junior (U20):			Senior:				
	SA Masters (35 Years):			SA & Commonwealth Veteran (40+ Years):			World Veteran (50 Years+):				
	Age on 01/01/2025:										
					1			<u> </u>			
Weapons Fenced in Competitions:			Epee			Foil			Sabre		
	Handed		Le	ft Hand	Right Hand		t Hand				
					1			ı			
GFA 2025 (R350):	GFA 2025 Subs (R350):				Date:			Method:			
FFSA 2025 Subs (R400):		Amount Paid:			Date:			Met	hod:		
(Please attach p	dian Informa		-	(also need			nergency	contac	ct)		
First Name:					Last Name:						
Cell No:				Email Address:							
Residentia	al Address:										



2<sup>nd</sup> Parent/Guardian Information if under 18 (also needed in case of emergency contact)

First Name:

Cell No:

Email Address:

Residential Address:

GFA Banking Details: Gauteng Fencing Association

STANDARD BANK

Account Number: 42 010 1527 Beneficiary Branch No (IBT): 051001

Payment Method:

Cash:	EFT:
Handed to:	Proof of Payment/s Attached:   Y   N