

MEMBERSHIP FORM

PERSONAL INFORMATION

TITLE	MR	MRS	MISS	DR	PROF	OTHER	FILL IN HERE													
FIRST NAME(S)						SURNAME														
GENDER	M	F	IDENTITY NUMBER																	
NUMBER OF DEPENDENTS	1	2	3	4	5	6	7	8	9	10	OTHER									
EXTENDED FAMILY	1	2	3	4	5	6	7	8	9	10	OTHER									

R35 for extended under 70 yrs and R55 for over 70yrs but under 75yrs

NAME & SURNAME	IDENTITY NUMBER	NAME & SURNAME	RELATIONSHIP / ID
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NAME & SURNAME	IDENTITY NUMBER	NAME & SURNAME	RELATIONSHIP / ID
NAME & SURNAME	IDENTITY NUMBER	NAME & SURNAME	RELATIONSHIP / ID

CONTACT INFORMATION

PHYSICAL ADDRESS	
PHYSICAL ADDRESS	POSTAL CODE
CONTACT NUMBER	EMAIL ADDRESS

EMPLOYMENT INFORMATION

EMPLOYER (NAME)

MEMBERSHIP OPTIONS

CHOOSE PLAN OF CHOICE	MEAL PREPARATIONS	ASSISTANCE WITH ERECTING TENTS/HEAVY EQUIPMENT	WASTE MANAGEMENT	GRAVE CLOSURE	PLACING OF WREATHS
<input type="checkbox"/> SILVER (R30 p/m)				✓	✓
<input type="checkbox"/> GOLD (R60 p/m)		✓	✓	✓	✓
<input type="checkbox"/> PLATINUM (R85 p/m)	✓	✓	✓	✓	✓

ADDITIONAL MEMBERSHIP

BIOLOGICAL PARENTS (R30)	<input type="text" value="1"/>	<input type="text" value="2"/>	PARENTS IN LAW (R30)	<input type="text" value="1"/>	<input type="text" value="2"/>	GRAND CHILDREN (R30)	<input type="text" value=""/>
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*Services extended to members up to the age of 75 years only.

						MEMBERSHIP AMOUNT	R			
GRAND CHILDREN (SAME HOUSEHOLD)	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="6"/>	<input type="text" value="7"/>	<input type="text" value="8"/>	<input type="text" value="9"/>	R
						TOTAL AMOUNT	R			

NON-REFUNDABLE ADMINISTRATION AND JOINING FEE (R200)

I _____ of _____ (area) declare that the information provided in true and correct and i indemnify the service provider against damages that may be caused as a result of the information above.

DATE	<input type="text" value="D"/>	<input type="text" value="D"/>	<input type="text" value="M"/>	<input type="text" value="M"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	SIGNATURE
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Monthly fee is payable in advance and shall be paid into the below banking account on or before the first (1st) day of every month.

Email proof of payment to info@diphiri.com

BANKING DETAILS

FIRST NATIONAL BANK (FNB)	BRANCH CODE: 25655	ACCOUNT NUMBER: 62755092237
ACCOUNT HOLDER: DIPHIRIDOTCOM (PTY) LTD	REFERENCE: REFERENCE NUMBER	

*Please quote reference number in all communication made with us in future. Services are for labour only. Equipment charged seperately per item.

TERMS AND CONDITIONS:

- Completing this membership form does not guarantee acceptance of your application. The Diphiridotcom (Pty) Ltd shall have the sole discretion over eligibility of membership;
- Membership shall commence once all required supporting documents have been submitted (e.g member's identity document, proof of address, identity document of all dependants, marriage certificate etc)
- All payments must be made before the 3rd of every month. Payments made later than the 3rd day of each month but before the 7th day of the month will result in the temporary suspension of your benefits. Payments made later than a month will result in the immediate termination of your membership;
- In the event of termination, no refunds of the service fees will be made. Benefits will be reinstated upon payment of a re-joining fee of R75 plus the applicable monthly fee, provided the re-joining fee is paid within a month of the termination of membership.
- Re-joining fees paid after a month from termination, but within a period of 4 months shall be, subject to the conditions set out in clauses 6 and 7 below;
- Members shall not be eligible to claim any benefits within a period of 3 months after commencement of membership;
- Claims submitted after 3 months of membership, but within 6 months of joining will be honoured, subject to payment of a minimum amount equivalent to 50% of the costs charged to ad hoc clients;
- Services rendered outside of areas around Tshwane shall be charged at an additional cost of R4.00 per kilometre;
- All claims will be honoured, subject to timeous submission of the death certificate and all relevant documents;
- Diphiridotcom (Pty) Ltd shall not be liable for damages of any nature, whether caused by gross negligence, negligence or in any manner;
- Dependant in this terms and conditions shall mean the biological or adopted children of the member and shall be inclusive of the member's spouse, declared at the time of application for membership;
- This terms and conditions may be amended from time to time, at the sole discretion of Diphiridotcom (Pty) Ltd, and shall be binding on all members, subject to provision of notice to all members if the amendments materially affect the provision of services.