

Membership No: _____


MEMBERSHIP APPLICATION FORM

Personal details

Family Name _____ Given Name _____

Address _____

Post Code _____ email _____

 Home _____ Cell _____

Age _____ Gender _____

Employment/study

Profession _____ Employer _____

Trade _____

Craft/skills _____

Nationality _____ Qualifications _____

STUDENTS

Degree register for _____ Year of study _____

Institution _____ Faculty _____

Can we send mail to your home?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Do you have a driving licence?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Do you have access to a computer?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Do you have access to personal transport?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Are you registered disabled?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>

thru
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Projects Manager: Helen Fernand LL.B (Hons) LL.M Chair: Narnia Bohler-Muller BA LL.B LL.M

Patrons: Professor Costas Douzinas, Professor Drucilla Cornell

Board: Karin van Marle, Melissa Steyn, Collette Herzenberg, Lynne Abrahams

transformative human rights unit

making a critical difference in south africa

Membership No: _____

What areas are you particularly interested in?

Political and Civil Rights	<input type="checkbox"/>	Social and Economic Rights	<input type="checkbox"/>
Elections	<input type="checkbox"/>	Children's Rights	<input type="checkbox"/>
Prisoners/accused persons/victims	<input type="checkbox"/>	Legal Reform	<input type="checkbox"/>
Court cases	<input type="checkbox"/>	Writing articles/researching	<input type="checkbox"/>
Radio programmes	<input type="checkbox"/>	Video/film making/festivals	<input type="checkbox"/>
Scriptwriting	<input type="checkbox"/>	Music composition/performance	<input type="checkbox"/>
Other	<input type="checkbox"/>	Please state _____	

What languages do you speak?

	Poor	Good	Fluent
English			
Afrikaans			
Xhosa			
Zulu			
Others (please state)			

Where did you hear about us?

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