



Western Cape Forum for Intellectual Disability

WESKAAP FORUM VIR INTELLEKTUELE GESTREMDHEID — IQUMRHU LE NTSHONA KOLONI LOKHUBAZEKO NGENGOQONDO

ADDING SKILLS • ADDING KNOWLEDGE • ADVANCING RIGHTS

Membership Application/Renewal Form - Membership Period: 01 April 2025 to 31 March 2026

Name of organisation or individual:		
VAT number: (If applicable)		
Address: <i>Please include postal codes</i>	Physical:	
	Postal:	
Contact number/s:	Landline:	
	Mobile:	
	E-mail:	
	Fax:	
Contact person:	Name:	
	Job Title:	
	Contact number: Only if different to the above	
<p>Please indicate whether the WCFID may include the above contact details for: associations; organisations and centres (not personal details or the contact details of individual members) on a list that may be made available to the general public.</p> <p>Please <input checked="" type="checkbox"/> Permission granted: <input type="checkbox"/> Permission not granted: <input type="checkbox"/></p> <p>Name: _____</p>		
New members: <i>How did you get to hear about the WCFID?</i>		
<p>Important information: <i>Reference to membership of the WCFID</i></p> <ol style="list-style-type: none"> The WCFID logo may not be used by members, including, but not limited to: use on websites and/or printed material. Members may, subject to all the requirements for membership having been met, use a text reference to membership. In all such references the full name: Western Cape Forum for Intellectual Disability, must be used. 		
<p>Membership rate: R60.00 per annum</p> <p>Type of member: <i>Please</i> <input checked="" type="checkbox"/> Individual: <input type="checkbox"/> Rural: <input type="checkbox"/></p>		
<p>Membership rate: R220.00 per annum</p> <p>Type of member: <i>Please</i> <input checked="" type="checkbox"/> Centres: <input type="checkbox"/> Schools: <input type="checkbox"/> Organisations: <input type="checkbox"/> Residential Facilities: <input type="checkbox"/> Protective Workshops: <input type="checkbox"/></p>		
<p>When making a payment, please use the reference as shown on the WCFID's invoice. Remember to e-mail your completed membership form (pages 1&2), together with the proof of payment to: projects@wcfid.co.za</p>		
Bank:	Standard Bank, Rondebosch – Branch Code 51001	
Account holder:	Western Cape Forum for Intellectual Disability	
Current Account Number:	071 300 643	

A SUPPORT NETWORK FOR TRAINING - ADVOCACY - RESOURCES



021 510 4686



www.wcfid.co.za



www.facebook.com/wcfid



https://x.com/WCFID_ZA

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Reg. No: 000-888 NPO PBO No: 18/11/13/2392 VAT No: 4100 211772

est. 1971



NATIONAL LOTTERIES COMMISSION
LOTTO FUNDED

STATISTICS: This confidential information, linked to the B-BBEE Codes of Good Practice no. 36928 of 2013, is required for reporting and funding purposes only.

CATEGORIES	TOTAL	Male (M)	Female (F)	Black		White		Coloured		Indian		Other	
				M	F	M	F	M	F	M	F	M	F
Individual Members													
Staff/Volunteer staff													
Clients/ Learners/Residents													
Clients in Protective Workshops													
GRAND TOTAL													

**Please do not include details of staff/volunteer staff in the section below.
Only include details of clients/learners/residents, thank you.**

AGE GROUPS [excluding staff]	TOTAL	Male	Female	Black		White		Coloured		Indian		Other	
				M	F	M	F	M	F	M	F	M	F
Child Less than 18 yrs													
Youth 18 yrs up to 35 yrs													
Adult 36 yrs up to 59 yrs													
Older person 60 yrs and older													
GRAND TOTAL													

Completed by: _____

Job Title: _____ Date: _____

Thank you for supporting the WCFID

For more information about membership, please contact: Sandy Butler

Telephone: (021) 510 4686



E-mail: projects@wcfid.co.za