



South African Network of Religious Leaders Living with or Personally Affected by HIV & AIDS

Registered in 2007; Reg No: 053-799-NPO | NPC Reg No: 2024/226019/08

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MEMBERSHIP APPLICATION FORM

(All information declared on this form will be treated as highly confidential)

Section A: To be filled by every applicant.			
PLEASE USE BLOCK CAPITAL LETTERS			
SURNAME		NAMES	
CONTACTS	Landline		
	Cell		
	Email		
DATE OF BIRTH		TITLE	MALE
			FEMALE
NATIONALITY		ID NUMBER	
RESIDENTIAL ADDRESS			
POSTAL ADDRESS			
MARITAL STATUS	Single	Partnership	Divorced
	Married		Widowed
RELIGIOUS AFFILIATION		DENOMINATION	

Section B: To be completed by all applicants	
Religious leadership position held	
Current responsibilities	
Theological Qualification	
Name of immediate superior	

Section C: To be completed by all HIV-positive applicants	
When did you test HIV-positive	
Are you currently on ARVs	
Are you open about your HIV-positive status?	

Section D: To be completed by applicants who are personally affected by HIV and AIDS?		
Because of HIV and AIDS I have lost		
Because of HIV and AIDS, I am currently nursing		
Any other comments		

I have filled in all information to the best of my knowledge. I understand it to be true and correct. I understand that misrepresentation of information in this application will lead to automatic exclusion of membership with SANERELA+.

Signature: Date: _____

SANERELA+ BANKING DETAILS R150 membership fee Reference: Surname Bank name: FNB Account name: SANERELA NGO NPC Account type: GOLD BUSINESS Account number: 63231298456 Branch code: 240129



FOR OFFICE USE

Date application received: _____ Received by: _____