ASA ATHLETICS SOUTH AFRICA

Date:

2025 ASA PERMANENT LICENCE APPLICATION FORM

A licence number will only be issued to the club, by the province, when this form is fully and correctly completed by the applicant, verified by the club, and accompanied by payment in full. The club/province may use an electronic registration system, with the form electronically signed and EFT payments made, provided the electronic system is aligned with the ASA license registration application system.

Demographics - SRSA Requirement Black Coloured Indian White	I am a: Mark all activities relevant Athlete												Coach					Technical Official						Office Bearer								
Age category - SRSA Requirement Senior+ Junior High School Primary School Gender: Male Female Date of Birth (YYYY-MM-DD)	Discipline: Mark all activities relavant											Track & Field					Road Running					Off-Road Running						Race Walking				
Age category - SRSA Requirement Senior+ Junior High School Primary School Gender: Male Female Date of Birth (YYYY-MM-DD)																	-															
Gender: Male Female Date of Birth (PYPY-MM-DD)	Demographics - SRSA Requirement											Blac	Black				Coloured					Indian						White				
Title (Mr/Ns/br/ect.) Surname	Age category - SRSA Requirement											Senior+					Junior					High School						Primary School				
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Tel/Cell phone number Email address Occupation Next of Kin Name Tel/Cell phone number Ist DECLARATION: I declare that I am a bona fide athlete/coach/technical official/office bearer. I confirm that all the information provided on this application is true and correct. I understand that my participation in an athletics related event is subject to the ASA Constitution, its rules and regulations. I hereby accept that I participate in any event of ASA and its members entirely at my own risk. I indemnify ASA and its members, sponsors and organisers of any event against all and any action of whatever nature which may arise out of my participation and I agree that it is my responsibility to be medically fit to compete in any event. I understand that my information may be shared with ASA partners, in accordance with the ASA Privacy Policy. I understand that if I am a minor, my parent and/or legal guardian understands the nature of the athletic activity, approve of the declaration above, and sign it on my behalf. Date: Signature applicant: Signature of Parent/Guardian (Younger than 18yrs): Club: I confirm that the above information is correct; the athlete is registered to no other club; and domicile is correct.			1	╁			1			 	 			 	┢	┢	 														+	
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Province: I confirm that the club is affilliated to the province; and the domicile of the club and application is correct.												b Re	pres	presentative:																		

Signature and stamp of the Province: