



GLOSDERRY CITY IMPROVEMENT DISTRICT NPC
C/O PRES LES, 3 WILGE ROAD, CLAREMONT, 7708
www.gcid.co.za | info@gcid.co.za

Application for Membership

I,, ID number.....
hereby apply for membership of the Company.

I confirm that I am the registered owner* / the appointed representative of the registered
owner *of, erf numberCape Town.

My contact details are as follows.

E-mail address:

Telephone:

Cell phone:

Fax number:

Physical address:

Postal address:

I agree to receiving notices and communications from the company at my e-mail address as
above. I acknowledge that as a member of the company I will not incur any personal liability
to the company.

Signed:

Aton this day of2015

*delete where applicable Return by email to or by fax to