Annexure E

Application for Access ID Card Form – Sports and Wellness Club Member.

Sports Club Details	
Name of the Club	
Club Registration	
Nature of Sports Activity	
Sports Club Member's Personal Details	
Full Names	
Surname	
RSA Identity number	
Passport number	
CSIR Card number	
CSIR Cluster/ Portfolio/ Department working for	
Sports Activity	
Date of Contract Commencement	
Declaration by applicant	In the event that I lose/damage the card, I will bear the replacement cost as determined by the Security Department
Member's Signature:	Date:

Access Requirements (tick or name as applicable)	**X**
CSIR Scientia Main Gates	
CSIR Scientia Building(s) - (name) :	
CSIR Regional Office (s) - (name):	
Other (Specify): CSIR ICC South Gate A	X

CSIR Sports and wellness (Host)		
Full Names	Lebogang	
Surname	Mokone	
RSA Identity number		
CSIR Employee number		
Cluster/Portfolio/Department working for		
Authorised Signature		Date: