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FGASA MEMBERSHIP RE-REGISTRATION FORM

(For individuals 18 years and older whose membership has lapsed over the last 18 months)

Please take note that there is a FGASA membership form and a CATHSETA registration form.

You must complete both for processing to take place. PLEASE FILL IN THE FORM PROPERLY BY:

- Completing all sections of the form **CLEARLY** in **CAPITAL OR** block letters (illegible forms will NOT be processed).
- If you are international but are LIVING in SA, please fill in the SA membership form.
- Signing the form including the Code of Conduct section.
- Attaching to the form your **proof of payment**. **ALL** bank charges are to be for **YOUR** account.
- Attaching to the form your **certified copy of ID or passport and proof of highest education**.
- Attaching to the form your valid First Aid certificate if you already have one (required for FGASA qualification).
- Emailing a recent Jpeg photo or attaching to the form a passport size photo for your membership card.
- You need to register as a member with FGASA at least **TWO** months before being allowed to write an exam.
- Exam fees are **NOT** included in the registration fee. Please see separate exam application form.
- When making a payment/deposit **CLEARLY state your name** so that your payment can be located on the bank statement.

Annual subscription fees are payable 1 year from registration date, otherwise membership **will no longer be valid**.

RENEWAL FEES	SOUTH AFRICAN	INTERNATIONAL	SADC
Registration + Annual Subscription fee	R930.00	R1030.00	R1030.00
Exam fee (See separate exam application form)	R400.00	R400.00	R400.00

BANKING DETAILS: FIRST NATIONAL BANK / Branch 260 231 / ACC NUMBER: 6249 6791 346
SWIFT CODE: FIRZAJJ (international payments only)
International payments only - **ALL BANK CHARGES TO BE FOR YOUR ACCOUNT.**

THE FGASA CODE OF CONDUCT

All individuals wanting to become a member are required to sign the FGASA Guiding Principles and Code of Conduct indicating they will endeavour to abide by and uphold these principles.

I _____ hereby agree to subscribe to and uphold the FGASA Code of Conduct as indicated in the Company Memorandum of Incorporation. (See FGASA Website)

Signature _____ Date _____

**IMPORTANT: PLEASE ATTACH A CERTIFIED COPY OF YOUR ID DOCUMENT OR PASSPORT
ALL MEMBERS ARE TO COMPLETE THE CATHSSETA LEARNER REGISTRATION ON NEXT FEW PAGES**

OFFICE USE ONLY: MEMBERSHIP NUMBER ALLOCATED:



EXPLANATION FOR COMPLETING THE CATHSSETA REGISTRATION FORM

The FGASA membership application form has been modified to include the CATHSSETA required registration form (letter of intent).

This form is relevant for all new members and for any member embarking on a CATHSSETA accredited skills programme offered by FGASA.

If you are already a FGASA member and are doing any other **non-NQF certificates through FGASA** you are not required to complete this form.

Section 1 Learner details

CATHSSETA requires all these details to be completed for their own statistical purposes. FGASA will populate its own database with the relevant details from this section.

Section 2 & 3 Employer details

Indicate in the relevant box if you are currently employed or not.

Only complete the rest of this section if you are currently employed.

Section 4 Training Provider Details

This section has already been completed by FGASA given that FGASA is the accredited training provider with CATHSSETA.

Section 5 Skills Programme Details

1. Select the skills programme you are starting and mark it by means of a ✓ next to the relevant skills programme.
New members will either do the Nature Site Guide (NQF2) or the Culture Site Guide (NQF4).
2. If you are already qualified with the FGASA Field Guide (NQF2) qualification (Nature Site Guide NQF2) and you are doing the FGASA Trails Guide (Nature Site Guide Dangerous Game Areas NQF2 or NQF4) then you need to indicate this.

Section 6 Signatories

All relevant signatures and dates must be completed. If you are not employed the Employer signature section is left blank. A FGASA representative will sign the Training Provider section.

INDUSTRY FUNDED SKILLS PROGRAMME LEARNER AGREEMENT



PART A: DETAILS OF SKILLS PROGRAMME AND PARTIES TO THIS AGREEMENT

1. Learner details

1.1 Full name and Surname: _____

1.2 Identity number: _____

1.3 Age: _____ Date of Birth: ____/____/____

1.4 Gender: Male Female

1.5 Race: African Indian

Coloured White

1.6 Do you have a disability, as contemplated by the Employment Equity Act 55 of 1998¹

Yes (specify): _____

No

1.7 Citizenship: _____

1.8 Residential address: _____

1.9 Local/District Municipality: _____

1.10 Province: _____

1.11 Urban/Rural: _____

1.12 Postal address (if different from above): _____

1.13 Telephone number (home and work): _____

1.14 E-mail address: _____

¹ The Employment Equity Act defines a disability as a long-term or recurring physical or mental impairment which substantially limits prospects of entry into, or advancement in employment.



2. Employed Learner Yes No

(If employed complete below)

2.1 Name of employer: _____

2.2 Occupation: _____

3. Employer details

3.1 Name of employer: _____

3.2 Physical address: _____

3.3 SDL number (if applicable): _____

3.4 Name of SETA with which registered: _____

3.5 Name of contact person: _____

3.6 E-mail address: _____

4. Training Provider details

4.1 Legal name of training provider: THE FIELD GUIDES ASSOCIATION OF SOUTHERN AFRICA

4.2 Trading name (If different from above): SAME AS ABOVE (FGASA)

4.3 Business address: 343 Surrey Avenue, Ferndale, Petrob House, 5 Floor, East wing

4.4 Postal address: Postnet Suite 111, Private Bag x04, Fontainebleau, 2032

4.5 Name of contact person: Gillian Hine

4.6 Telephone number: 011 – 886 8245

4.7 Fax number: 011 – 886 8084

4.8 Email address: manager@fgasa.org.za

4.9 Are you a **Public** or **Private** Training Provider?

SDL number if applicable: L670733759

4.10 Name of SETA where Skills programme resides: CATHSSETA

4.11 Name of Seta where Training Provider is accredited: CATHSSETA

4.12 Accreditation number: 613/P/000004/2004

4.13 Accreditation review date: 31/03/2019



5. Skills Programme Details

Name of Skills Programme	[✓]
Nature Site Guide (NQF2) (40 Credits)	
Nature Site Guide (NQF4) (32 Credits)	
Nature Site Guide Dangerous Game Areas (NQF2) (55 Credits)	
Nature Site Guide Dangerous Game Areas (NQF4) (47 Credits)	
Culture Site Guide (NQF4) (34 Credits)	
Start Date of Actual Training	
End Date of Training	
Duration of Skills Programme	
Training NQF Level	
Number of Credits	
Occupation or OFO code Skills Programme is directed towards. E.g. chef, tour guide etc.	Tourist Guide

6. Signatories

Learners signature: _____ Date: _____	Employer signature _____ Date: _____
Training Provider signature _____ Date: _____	

FOR OFFICE USE ONLY	
Name of CATHSSETA Official:	_____
Signature:	_____