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ADMINISTRATIEWE EN UITVOERENDE KANTOOR ADMINISTRATIVE AND EXECUTIVE OFFICE IOFISI YOLAWULO NEYESIGQEBA

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PROTECTED AREAS ADVISORY COMMITTEE APPLICATION FORM

PERSONAL DETAILS
1. FULL NAME:
2. ADDRESS AND POSTAL CODE:
3. TELEPHONE / CELL PHONE NUMBER:
4. E MAIL ADDRESS:
(The following information is used only for the purposes of ensuring equal representivity in our forum)
5. <u>GENDER</u> : F
6. <u>AGE GROUP:</u> <20 21- 30 31 - 50 51 - 60 61 - 70
7. EXPERIENCE, LEARNING AND SKILLS:
8. DO YOU HAVE ANY BUSINESS INTERESTS IN THE RESERVE? IF YES, PLEASE SPECIFY:
Declaration:
I understand that any offer of volunteering with the Langeberg Municipality is binding in honour only and that I will receive no financial remuneration for being a member of the Langeberg Municipality Protected Areas Advisory Committee.
Signature:
Date: