



SA *Wrestling Federation* *Stoiefederasie*

AFRIGTERS RAAD / COACHES COUNCIL

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Aan: Sekretaris/Voorsitter – Stoeiverenigings
SASF Uitvoerende Bestuurslede

Van: SASAR

8 Junie 2009

SASAR SKRYWE 2009/17

Ons versoek asb dringend dat die aangehegte stoeier informasie vorm deur die stoeiers op die lys ingevul word en deur gefaks word na A Addinall by 011 916 1121.

Die inligting moet asb voor of op Vrydag **12 Junie** 2009 deurgestuur word.

Vorm moet ook asb kopie van ID & Passpoort dokument vergesel.

8 Passpoort foto's word ook benodig, en dit kan by eerskomende naweek se oefenkamp aan Nico Coetzee oorhandig word, of by enige van die volgende stoei byeenkomste aan Sekretaris Generaal Manie vd Berg of A Addinall.

Ons versoek verenigings om asb behulpsaam te wees om die inligting so spoedig moontlik deur te gee aan stoeiers se klubs vir dringende terugvoering.

NAAM	PROV
WILLIAMS LENOVA	WP
DE VILLIERS JOHAN	WP
STEENKAMP CHARLIE	SENG
SMITH IVAN	SENG
DUVENHAGE MARIUS	SENG
WILLIAM COHEN	OP
SWANEPOEL STEPHAN	OG
REDELINGHUYS JOHANNES	OG
MURRAY JJ	OG
MASUNYUANE BOKANG	OG
LE ROUX STEFAN	OG
ENGELBRECHT ZIRK	OG

COETZEE MARCO	OG
NEETHLING ELRI	NVRY
ERASMUS KALLIE	NVRY
MARAIS MERRICK	NG
MARAIS MARCEL	NG
LABUSCHAGNE C	NG
GREGORY JUAN	NG
GREGORY LEONARD	NG
GOOSEN SHANE	NG
FOURIE ESTIAAN	NG
COETZEE REGARDT	NG
COETZEE PIETER	NG
BORNMAN ALEX	NG
VERMEULEN RUDOLPH	MPUM
SCHUTTE ANDRIES	MPUM
GERINGER ZANDER	MPUM
BROWN S	KZN

Stoei groete

Afrigters Raad

Athlete √	Code Manager	GTM	Medical Team	Project Team					
Coach	Ass Coach								
Affiliated organization		SOUTH AFRICAN WRESTLING FEDERATION							
Sport		WRESTLING							
Family Name									
Given Name									
Preferred Given Name									
Maiden Name (if applicable)									
Gender									
Height (cm)									
Weight (kg)									
ID Number									
Nationality									
Passport		South African	Other: (Please Specify)						
Passport Number									
Date of Issue		M	M	D	D	Y	Y	Y	Y

Expiry Date of Passport (Valid for at least 6 months)	M	M	D	D	Y	Y	Y	Y
Date of Birth	M	M	D	D	Y	Y	Y	Y
City and Country of Birth								
Permanent Residential Address								
								Postal Code:
Country								
Province								
City								
Postal Address								
								Postal Code:
Telephone #								
Cellphone #								
Fax #								
Email								
Do you have disability?								
Classification of disability								
Race								
Coach								
Coach Contact #								
Club								
Fathers Full Names (even if deceased)								
Mothers Full Names (even if deceased)								
Athlete's occupation								
Employer								
Fulltime/Part time								
Next of Kin								
Next of Kin Contact #								
Medical Aid								
Main member's name								
Membership number								

VERY IMPORTANT:

1. PLEASE SUBMIT **8 (EIGHT) RECENT COLOUR PASSPORT PHOTOGRAPHS** or **ONE HIGH RESOLUTION ELECTRONIC COLOUR PICTURE** TOGETHER WITH THIS FORM.

2. PLEASE SUBMIT A **CLEAR PHOTOCOPY OF YOUR PASSPORT
AND I.D.** TOGETHER WITH THIS FORM.

OUTFITTING

Kindly complete the form below. Please ensure that all fields are completed and that the information is 100% accurate.

Formal/Parade wear		
	Please indicate Sizes as per 12, 14, 30, 32, 42, 50, etc	Notes e.g. extra long
Formal Jacket Men		
Formal Shirt Men		
Formal Pants Men		
Formal Shoes Men		
////////////////////////////////////	////////////////////////////////////	////////////////////////////////////
Formal Jacket Ladies		
Formal Shirt Ladies		
Formal Pants Ladies		
Formal Skirt Ladies		
Formal Shoes Ladies		

Leisure wear (Please note Gender Specific)		
	Please indicate Sizes as per S, M, L, M, XL, 2XL, 3XL etc	Notes
Tracksuit Top		
Tracksuit Pants		
Golf Shirt		
T Shirt		
Shorts		
Cargo Pants		
Sweatshirt		
Drimac		

Footwear		
	UK sizing please (same as sizing used in SA)	Notes
Pool Sandals		
X-Trainer		

