



SA JAGGEWEERSKIETVERENIGING HUNTING RIFLE SHOOTING ASSOCIATION

Geakkrediteerde Vereniging Nr. 1300039 Accredited Association

Membership and League Registration Fees (Valid: 1 January – 31 December 2025)

SAHRSA operates as a sport league. Membership and registration consist of two components:

Step 1: Once-Off Registration Fee R100 – Payable only by:

- All new applicants
- Returning members who did not register in the previous year
- Late re-registrations (after the registration deadline of 31st of March)

Step 2: Annual League License Fee

This yearly fee qualifies a competitor for:

- Event results to count toward the official league log
- League membership confirmation letter (for license and competency applications)
- Firearm license application endorsement letters
- Dedicated sport shooter status (if qualifying)
- League member discounts (when offered)

Note: If not registered for the current year, a competitor may still participate, but their results will not count toward the league log, and benefits will lapse.

The license fee is not recoverable in arrears. Each member receives a lifetime member/license number.

Annual League License Fee

R850.00 – Full amount payable before annual deadline.

Prorated Fee for First-Time New Members

New member	JAN to MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Main Member R100 +	R850	R800	R750	R700	R650	R600	R550	R500	R450	R400
Discount* Additional Family member or person older than 60 R100+	R425	R400	R375	R350	R325	R300	R275	R250	R225	R200

Who Qualifies for **Discounts**?

- Married Spouse and/or dependent children under 21 – 50% discount
- Members aged 60 and over – 50% discount
- Children under 14 – Free*

Note - Family discounts apply only if linked to a main registered member.

Membership Type Summary

Type	Fee	Notes
Day Visitor	R50 Day License per event	Payable with event registration
New League Member	R100 + Prorated Fee	One-time joining fee
Returning League Member	R850	Full annual license fee
Family League Member	50% of applicable fee	Spouse or child <21
Senior(60+) League Member	50% of applicable fee	Age at application or renewal
Child under 14 (Penkop)	Free	Linked to registered main member

Application process:

- Complete Annexure A (Membership Form)
- Sign Annexure B (POPIA Consent Form)
- send completed Annexure A and B forms, copy of ID document and proof of payment to the following
e-mail: secretary@sahuntingrifle.co.za
- Register your profile online at: www.sahuntingrifle.co.za

Note : Applications may take up to 14 days to complete but not limited to. No membership card will be issued

Bank details	
Acc Name	SA Hunting Rifle Shooting Association
Banking Institution	ABSA
Account No:	405-332-9776
Branch	
Account Type	Current
Payment Reference	Initials + "Surname"



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APPLICATION FOR MEMBERSHIP

FULL NAMES _____ SURNAME _____

ID NO / BIRTH CERT.													
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CONTACT DETAILS:			E-MAIL ADDRESS :										
CELL													
HOME													
WORK													

RESIDENTIAL ADDRESS:

POSTAL ADDRESS:

Residential Address		PO Box Address (Mark X if same as Residential)	
Street Name : No :			
Estate	Suburb		
Postal Code			
PROVINCE			
MUNICIPAL DISTRICT			

Declaration

I, the undersigned, hereby apply for for the above mentioned person, for league membership of the South African Hunting Rifle Shooting Association (SAHRSA) and confirm that the applicant will comply with the Association's constitution, rules, code of conduct, regulations, and disciplinary procedures (available on the official website).

I acknowledge and accept that participation in any SAHRSA event or presence at a SAHRSA-approved shooting range is entirely at my own risk. I hereby waive and release SAHRSA, its officials, and its members from any and all liability for injury, loss, damage, or claims of any kind that may arise from my participation in, or attendance at, such events or venues. This includes claims made by myself, my estate, or any dependents.

I further confirm that I will not institute, or allow to be instituted, any legal action against SAHRSA or its representatives for such matters.

Signed at..... DATE:.....

APPLICANT'S SIGNATURE (Guardian member if minor).....

ANNEXURE B: POPI NOTICE AND CONSENT FORM

POPI NOTICE AND CONSENT FORM

We understand that your personal information is important to you and that you may be disclosing such information. We are committed to safeguarding and processing your information in a lawful manner.

We are obligated to ensure that you understand the purpose of processing your personal information. Should you be of the opinion that your information is not processed in line with good practice in terms of the POPIA, or that information is being used for a purpose other than that for what it was originally intended, you can contact our Information Officer.

You can request access to information in our possession that pertains to you or in the event that you believe your information is outdated.

Our Information Officer's Contact Details	
Name	Conrad Walter de Does
Contact Number	084 9022000
Email Address:	secretary@sahuntingrifle.co.za

Purpose for Processing your Information

We collect, hold, use and disclose your personal information mainly to provide you with access to the services and/or products that we provide. We will only process your information for a purpose you would reasonably expect, including:

- Providing you with advice, products and services that suit your needs as requested
- To confirm, verify and update your details
- To comply with any legal and regulatory requirements

Information in our possession may include, your first and last name, email address, a home, postal or other physical address, other contact information, your title, birth date, gender, residency status, banking details and other related information.

Consent to Disclose and Share your Information

We may need to share your information to provide services and related support you have requested or require.

In the event that we are required to share your information, we will take all precautions to ensure that the third party will treat your information with the same level of protection as required by us in terms of the Act. Your information may be hosted on servers managed by a third-party service provider, which may be located outside of South Africa.

I hereby authorize and consent to the organization sharing my personal information with the following persons:	
SAHRSA Club/District/Provincial management for membership registers Annual Membership declarations to SASSCO and Sports Councils SAPD declarations regarding membership status and membership type	
Name & Surname	
Signature	
Date	



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FOR OFFICE USE ONLY

Approved/Declined:	Yes No	Expiry date of Membership
Reason		
Dedicated Sport Person No		
Signature:		
Designation		
Date		