

## APPLICATION FOR MEMBERSHIP 2023/2024

To be completed and submitted to the Secretary of your corresponding Farmers Association.

I, the undersigned, herewith apply to become a member of the

**Farmers Association** 

and the Namibia Agricultural Union.

Main Member	NAD 5,264.70 (VAT inclusive)			
Additional member	NAD 263.24 (VAT inclusive)	Membership number for main member		
Phase-in	Yes No			
First time applicants who are registered as new NAU main members can make use of the phase-in system (if so chosen). This system is based on a percentage discount of the membership fee as determined by the congress <i>Note: Phase-in only applies to main members.</i>				
1st year	25% of main member fees	NAD 1,316.18	(VAT inclusive)	
2nd year	50% of main member fees	NAD 2,632.35	(VAT inclusive)	
3rd year	75% of main member fees	NAD 3,948.53	(VAT inclusive)	
4th year	100% of main member fees	NAD 5,264.70	(VAT inclusive)	
Membership fees are renewable annually on 1 March. I, herewith apply for membership of the following specialist associations:				
Surname				
Full name				
Also known as ("noemnaam")				
Title	Initials			
Corporate name (if applicable)				
VAT number		(to be indicated on invoices of	VAT registered members)	
Namibia Landbou Unie Namibia Agricultural Union				
Privaatsak 13255   WINDHOEK   NAMIBIË Private Bag 13255   WINDHOEK   NAMIBIA Tel +264 61 237 838   Faks +264 61 220 193 Tel +264 61 237 838   Fax +264 61 220 193				
	Epos: nau@agrinamibia.com.na Email: na	u@agrinamibia.com.na		



\_\_\_\_ To support and promote a conducive environment \_\_\_\_\_ for sustainable agriculture

Farm names & numbers	1.)	
	2.)	
	3.)	
	4.)	
	5.)	
ID number		
Passport number (if not Namibian)	Date of birth	
Postal Address		
Region	Postal code	
Telephone number		
Cellphone number		
Email address		
Medical Aid	NHP NMC Membership number	
Member of group fund	Yes No Group fund transfer letter required	Yes
Agriforum pick up point		
Agronomy	Livestock	Game
Tourism / Hunting	Charcoal	Dairy
Piggery	Poultry	Swakara
Other (please state):		

SIGNATURE

DATE \_



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