



# Vending Association of South Africa

**“Working Together for a Better Industry”**

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## Application for Membership

**Business Name** \_\_\_\_\_

**Which is registered as Pty Ltd** \_\_\_\_\_ **or CC** \_\_\_\_\_ **or Sole Trader** \_\_\_\_\_ **or not registered** \_\_\_\_\_ (please tick)

**Registered Address** \_\_\_\_\_

\_\_\_\_\_ **Code** \_\_\_\_\_

**Owner, Partner and/or Director names** \_\_\_\_\_

**Contact Person** \_\_\_\_\_

**Telephone No** \_\_\_\_\_ **Fax Number** \_\_\_\_\_

**Cell Number** \_\_\_\_\_ **E - mail** \_\_\_\_\_

**How long has the company been in the vending business?** \_\_\_\_\_ years.

**Categorize the business activity:** - (please tick)

a) Operation of vending machines for the sale of commodities or services other than self operated location

b) Manufacturer, distribution or sale of commodities/products for use in vending machines

c) Manufacture, distribution of component parts, accessories and technical services for vending machines

d) Other, described more fully: - \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I/we the owners/partners/directors undertake that I/we will, if accepted, and so long as I/we remain in membership, abide by the constitution and rules of the association and any code of ethics and resolutions that may from time to time be approved by membership in any General Meeting.

Signed: Owner ..... Partner/Director .....

Date: .....