



**MICAN ADMIN OFFICE**  
 P.O. Box 993, Rundu, Namibia Fax: 066 256695 Cell: 0811430464  
<http://www.mican.com.na>

**NEW MEMBERSHIP / ANNUAL RENEWAL** (Please cancel the one not applicable)

NAME: .....

Postal Address: .....

Physical Address: ( Where all correspondence can be couriered/mailed to )  
 .....  
 .....

Tel Home: .....Tel Work: ..... Fax: .....

Cell:..... E-Mail: .....

Microlight Pilot Licence / Student Pilot Licence No. : ..... MPL/MSL.....

Aircraft type: .....( only if is your own) ..... Reg. No: (call sign) .....

Pilot License Renewal Date: ..... MPI (AP) renewal date: .....

**Fees Payable:** (Please indicate in appropriate space, O, next to each amount with a X )

|  |     |                      |                       |
|--|-----|----------------------|-----------------------|
| Initial Sign up Fee (Joining Fee)  | N\$ | 250-00               | <input type="radio"/> |
| Annual MICAN Membership Fee (per member)   | N\$ | 450-00               | <input type="radio"/> |
| 3 <sup>rd</sup> Party Insurance on Microlight: (Cover of N\$ 500 000) (per aircraft) | N\$ | 300-00               | <input type="radio"/> |
| Microlight Annual Inspection Fee (per aircraft)                                      | N\$ | 350-00               | <input type="radio"/> |
| <b>AMOUNT DUE</b>  | N\$ | <input type="text"/> |                       |

Please, preferably do direct deposits at any FNB branch or I-Banking transfers  
 Checks must be crossed and made payable to MICAN. Please note that 3<sup>rd</sup> Party Insurance is per Aircraft  
 and not per pilot.

MICAN BANK DETAILS (FOR DIRECT DEPOSITS)  
**Microlight Association of Namibia (MICAN)**  
**First National Bank**  
 Acc No: 62084619223  
 Branch: 280-472 (Swakopmund)

**Please FAX or mail deposit slip together with this form to 066-256695**

**FOR ATTENTION: Mr. D.A. Oelofse**

[oelofsed@iway.na](mailto:oelofsed@iway.na)

**P. O. Box 993, Rundu, NAMIBIA.**

**If not done in this manner, payments received will be handled as donations to MICAN, as the payment cannot be credited against any name;**

SIGNATURE OF MEMBER .....

DATE:.....