



Commission for the Promotion and Protection of the Rights of Cultural, Religious and Linguistic Communities.

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Braamfontein, Johannesburg  
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**COMMUNITY COUNCIL REGISTRATION FORM:**

<b>1.Name of Organization</b>			
<b>2.Contact details</b>	<b>Postal Address:</b>		
	<b>Physical Address:</b>		
	Phone No :		
	Fax No :		
	E-mail address:		
	Web-site Address:		
	<b>Contact Details of Key Office Bearers</b>	<b>Chairperson (Name):</b>	
		Contact details:	
	<b>Secretary General (Name):</b>		
	Contact details:		
	<b>Treasurer (Name):</b>		
	Contact details:		

		Any other information
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**Section A:**

<b>3. Legal Status of the Organization</b>	Type of Organization: (e.g. Association, NPO, Section 21)etc)	
	Registration Number ( including date of establishment):	
	Tax/Vat Number	
<b>3.1 Organizational Constitution</b>		
<b>4. Membership of the Organisation</b>	Nature of Membership(paid or unpaid)	
	Size of Membership	
	Gender Breakdown	
	Language Breakdown	
	Geographic Location	
<b>5. Main Focus Areas(Nature of Organizational Activities)</b>	1.Culture	
	2.Religion	
	3.Linguistics	
	4.	
<b>6. Geographic Operations</b>	1.Name of local area	
	2.District	
	3.Province	
<b>7. Main Sources of Funding</b>	1.	

	2.
	3.
<b>8.Affiliations</b>	<u>Bodies affiliated to the organizations:</u>
<b>8.1. Please indicate if you are an umbrella body or non umbrella body</b>	
	<u>Bodies to which the organization is affiliated:</u> (a) (b) (c)
	<b><u>9. Any other Relevant Information Pertaining to the Organisation:</u></b>  Date of registration: _____

**Please attach constitution/minutes of your organization**