

Individual Membership Application Form 2026



PROOF OF PAYMENT AND THIS MEMBERSHIP FORM MUST BE FORWARDED VIA EMAIL TO THE ADMINISTRATOR AT INFO@GAMERANGER.ORG

A: MEMBERSHIP TYPE, LEVEL AND FEE

- **FIELD RANGER:** Being any person who has earned his or her living in field ranging (field operations)
- **GAME RANGER:** Being any person who has earned his or her living in game ranging (protected area management)
- **MEMBER:** Being anyone who wishes to support the Association
- **STUDENT:** Being anyone studying in the field of conservation or still at school

MEMBERSHIP TYPE (TICK ONE)

- ☐ Field Ranger Membership (Annual Fee: ZAR127/US\$7)
- ☐ Game Ranger Membership (Annual Fee: R636/US\$37)
- ☐ Membership (Annual Fee: ZAR636/US\$37)
- ☐ Student Membership (Annual Fee: ZAR127/US\$7)

MEMBERSHIP LEVEL (TICK ONE)

- ☐ Candidate: Less than 5 years continuous experience
- ☐ Professional: More than 5 years continuous experience

NB: Only applicable for Field Ranger and Game Ranger membership types. Please attach a separate C.V to this application stipulating the protected areas and capacity in which you worked, dates of service and, comprehensive details of the type and nature of work undertaken at each post.

B: APPLICANT CONTACT INFORMATION

First Name:	<input type="text"/>	Last Name:	<input type="text"/>	
Address:	<input type="text"/>			
Post Code:	<input type="text"/>	Region:	<input type="text"/>	
		Country:	<input type="text"/>	
I.D Number & DOB:	<input type="text"/>		Phone No:	<input type="text"/>
Email:	<input type="text"/>			

C: BENEFICIARY DETAILS (IF APPLICABLE)

NB: Section C only applicable for those eligible for the Ranger insurance product offered by the GRAA.
This is at an additional cost of ZAR 709/US\$40/annum for 2026. Contact the GRAA for more information.

First Name:	<input type="text"/>	Last Name:	<input type="text"/>
Relationship to Member:	<input type="text"/>		
I.D Number:	<input type="text"/>	Phone No:	<input type="text"/>
Email:	<input type="text"/>		

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D: EMPLOYMENT INFORMATION

Job Title: Rank:

Protected Area/ Organisation Name:

E: PROPOSER (MUST BE A PROFESSIONAL MEMBER OF THE GRAA)

Name: Membership Number:

F: SECONDER (MUST BE A MEMBER OF THE GRAA)

Name: Membership Number:

G: SKILLS INFORMATION

Please give us an indication of any professional skills we can utilise within the Association, e.g. Guiding, Consultancy, Research, Environmental Education, Hunting, Language, Pilot, Diver, Photographer, Business Administration, Financial, etc.

H: DECLARATION

I (print name):

Apply for (print membership type and level):

Signed (insert signature): Date:

I: ADMITTANCE TO MEMBERSHIP

- The Association may, at its absolute discretion, admit or not admit any application to any category of membership.
- Acceptance to any category of membership of the Association obliges such member to abide by the Constitution and Code of Ethics of the Association.
- Should any applicant not be admitted to membership, he or she may not reapply for 6 months from the date of the refusal of the application.
- By joining the Association, you give the Association the right to share your contact information with the Regional Chairs of the Association and the Administrator for communication purposes.
- Successful applicants will have the following sent to them: Constitution, Manifesto, Badge and Welcome Letter.

J: PAYMENT PROCESS

- Please submit your membership fees with this application. If your application not be successful, your fees will be returned.
- Payment can be made our [website](#) or direct transfer to the below account.
Name: GAME RANGERS ASSOCIATION OF AFRICA
Bank: FIRST NATIONAL BANK
Country: SOUTH AFRICA
Branch Code: 250655
Account No.: 53980026795
Swift Code: FIRNZAJJ
- [Please use your name as reference and email proof of payment to info@gameranger.org.](#)