



INSTRUCTION LETTER - REGARDING THE MEMBER'S RESPECTIVE MODULE/WEEK ANNUAL ARRANGEMENTS REGARDING OCCUPATION, UPDATE OF PERSONAL INFORMATION AND PAYMENT INSTRUCTIONS

requ	est the N	rious persons listed below (hereinafter referred to as <i>lanaging Agent</i> to update our information regarding	g our p	portfolio as provided herein and fu			
require the Managing Agent to give effect to our instructions as stipulated herein: PERSONAL INFORMATION UPDATE							
1.1	-	and Surname (or) Company Name:					
1.2	Identity	No(s) (or) Company Reg No:					
1.3	Telepho	ne Number(s): (H) ()		(W) ()			
1.4	Cell pho	one number(s): 1 2					
1.5	Fax Num						
1.6	E-mail(s)						
1.7	Physical	(Residential) Address:					
				Co	de:		
1.8	Postal A	ddress:		Co	de:		
2.	DETAILS	OF TIMESHARE MODULE(S)/WEEK(S)					
2.1	Resort(s):	2.3	Unit(s)/Chalet(s):			
2.2	Module(s)/Week(s): 2.4 Membership No(s):						
3.	-	ATION INSTRUCTIONS		tick the corresponding box to	Option(s)	<u>Module(s)</u> / Week(s)	
	Please select the relevant option below you wish to pursue and <i>tick the corresponding box</i> , to enable the managing agent to give effect to your occupation instructions for the year 2021 regarding					<u>/ WEEK(3)</u>	
	the relevant timeshare week(s)/module(s).						
	Please note: All space bank requests must be submitted at least 120 days prior to occupation date. No instructions can be actioned, unless your full levy account has been paid.					(Specify)	
3.1	3.1.1	We will occupy the timeshare module/week.					
	24.2			dhalan kasan dha			
	3.1.2	We authorise the person(s), with further details stipulated below, to occupy the					
	2 4 2 4	respective module/week.					
	3.1.2.1	Name(s) and Surname:					
	3.1.2.2	Identity No(s):					
	3.1.2.2	Identity No(s):					
	3.1.2.3	Contact phone No(s):					
	5.1.2.5						
3.2	3.2.1	Kindly bank our module/week with VRS Options.					
	3.2.2	Kindly bank our module/week with RCI/7Across: (I					
3.3	3.3.1	Kindly place our module/week up for Rental with GoMelo.					
	3.3.2	Kindly place our module/week up for Rental with the Resort (If the respective Resort has					





	this option	available).						
4.	PAYMENT INSTRUCTIONS Please select a payment option below and <i>tick the corresponding box</i> , advising our offices how y					<u>Module(s)</u> / Week(s)		
	intend to settle the documentation and f	(Tick)	(Specify)					
4.1	We are going to sett (Kindly complete ann							
4.2	We are going to sett (Kindly complete ann							
5.	VERIFICATION We hereby confirm that we are the registered holders of the timeshare module(s)/week(s) stated above. We confirm that the information contained herein are both true and correct. We hereby authorise the Managing Agent to do the necessary to give effect to our instructions.							
	we hereby dutions							
6.	SIGNATURE					_20		
6.	SIGNATURE	ned at	on the 2	day of				
6.	<u>SIGNATURE</u> This document is sig	ned at	on the	day of				
6.	SIGNATURE This document is sign Member(s)	ned at	on the 2	day of				
7.	SIGNATURE This document is sign Member(s) Spouse/Partner NOTE:	ned at 1 1	on the 2	day of				
7. <u>PLE</u> /	SIGNATURE This document is sign Member(s) Spouse/Partner NOTE:	ned at 1 1 1 MPLETED AND SIGNED INS [*]	on the 2 2.	day of				
7. <u>PLE/</u> <u>EM/</u>	SIGNATURE This document is sign Member(s) Spouse/Partner NOTE:	ned at 1 1 1 MPLETED AND SIGNED INS [*]	on the 2 2.	day of				



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ANNEXURE "A" - DEBIT ORDER AUTHORISATION (LEVIES)

Given by (Name of Account Holder):	
Address:	
	Code:
Bank	
Branch and Code	
Account Number	
Type of Account	
Amount:	R, which amount may vary from time to time in accordance
	with the Agreement.
Date	(/)
To (Name of Beneficiary): Abbreviated Name as Registered with Beneficiary's address:	Vacation Recreational Services (Pty) Ltd he Bank: VRS Mooikloof Office Park East, Cnr Atterbury and Jollify Main Road, Mooikloof Pretoria

This signed Authority and Mandate refers to our contract dated ___/_/ ("the Agreement") and which debit order amount may vary from time to time in accordance with the Agreement.

I/We hereby authorise you to issue and deliver payment instructions to your Banker for collection against my/our abovementioned account at my/our above-mentioned Bank (or any other Bank or Branch to which I/we may transfer my/our account) on condition that the sum of such payment instructions will never exceed my/our obligations as agreed to in the Agreement and commencing on ____/___/ and continuing until this Authority and Mandate is terminated by me/us by giving you notice in writing of not less than 20 ordinary working days, and send by prepaid registered post or delivered to your address as indicated above.

The individual payment instructions so authorised to be issued must be issued and delivered as follows: monthly.

In the event that the payment day falls on a Sunday, or recognised South African public holiday, the payment day will automatically be the very next ordinary business day.

I/We understand that the withdrawals hereby authorised will be processed through a computerised system provided by the South African Banks. I also understand that the details of each withdrawal will be printed on my Bank statement. Such must contain a number, which must be included in the said payment instruction and if provided to me should enable me to identify the Agreement. This number must be added to this form in Section E before the issuing of any payment instruction.

B. Mandate

I/We acknowledge that all payment instructions issued by you shall be treated by my/our above-mentioned Bank as if the instructions have been issued by me/us personally.

C. Cancellation

I/We agree that although this Authority and Mandate may be cancelled by me/us, such cancellation will not cancel the Agreement. I/We shall not be entitled to any refund of amounts which you have withdrawn while this Authority was in force. If such amounts were legally owing to you.

D. Assignment

I/We acknowledge that this Authority may be ceded or assigned to a third party if the Agreement is also ceded or assigned to that third party, but in the absence of such assignment of the Agreement, this authority and Mandate cannot be assigned to any third party.

Signed at	on this	day of	20
(Signature as used for operating on the account)		(Assisted By)	
E. Agreement Reference Number			

This Agreement reference/contract number is: *(Member number)* _____ which a copy of the contract was provided to yourself on date of sale.

_ for your membership number,