

REGISTRATION FORM - CRA recycling scheme

Either: Name of homeowner:

OR - Complex details:

Complex name: _____

Complex contact person [if whole complex joins]: _____

Physical Address of Service Point: _____

Current Municipal collection day: MONDAY

Contact Details:

Work Telephone Number: _____

Home Telephone Number: _____

Cellular Phone Number: _____

Email Address: _____

Please fax or email the completed form to: 011 822 3657 / email: carmen@wasterecyclers.co.za. Mama She's will contact you with further information, including banking details.



mama she's
waste recyclers

green at heart

