



THE MARRIAGE AND FAMILY FOUNDATION

Strong Individuals | Resilient Families | Cohesive Society

**Free Counselling Services
Information Leaflet & Application**

AFFIDAVIT TO ACCESS FREE SERVICES



THE MARRIAGE AND FAMILY FOUNDATION
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I, the undersigned

Full Names &

Surname _____

With ID Number: _____

Declares as Follows:

1. I am an applicant of pro-bono counselling services from The Marriage and Family Foundation.
2. I acknowledge and understand that the pro bono service which is rendered by the psychologist / counsellor is provided for free. It means that the psychologist / counsellor will not charge any fees for professional services rendered.
3. I declare that: (Please circle the applicable)
 - a. I am not employed nor have income.
 - b. I am employed; however my annual income is less than R250 000 per annum.
4. I confirm that I understand the contents of this declaration, that the contents are true and correct, and that I have no objection to make this declaration.
5. I acknowledge that pro bono services may be withdrawn at any stage, should it come to the attention of TM&FF that if any of the information set out in the pro bono application form is false or incomplete.

Signature

Date

Please return with applications form to: probono@thefamilyinstitutesa.co.za

NB: Proof of Income to be submitted if you are employed with an annual salary of less than R250 000 per annum.