



## SANATA MEMBERSHIP FORM

### International Member

Name:	
Surname:	
Email address:	
Cell Number:	
Country of Residence:	
Website:	
Date of birth:	
Profession:	
Year qualified:	
University:	
Other professional bodies:	
Reason for joining:	

For the current year 2020-2021, the following fees are applicable:

**International Member**

**R500 discounted annual fee**

**Fees due by 30 April 2020.**

I, \_\_\_\_\_, the undersigned agree to the code of conduct and constitution of SANATA. I agree to pay the annual membership fee of R500.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date