



SANATA MEMBERSHIP FORM

Associate Member – Local and International

Name:	
Surname:	
ID number:	
Email address:	
Cell Number:	
Residential address:	
Area of practice (local):	<input type="checkbox"/> Gauteng <input type="checkbox"/> Western Cape <input type="checkbox"/> North-West <input type="checkbox"/> Kwa-Zulu Natal <input type="checkbox"/> Northern Cape <input type="checkbox"/> Eastern Cape <input type="checkbox"/> Mpumalanga <input type="checkbox"/> Freestate <input type="checkbox"/> Limpopo
Area of practice (int):	
Website:	
Date of birth:	
Profession:	
Year qualified:	
University:	
Other professional bodies:	
Reason for joining:	



For the current year 2021-2022, the following fees are applicable:

Associate Member

R200 discounted annual fee

Fees are due by 30 April 2021.

I, _____, the undersigned agree to the code of conduct and constitution of SANATA. I agree to pay the annual membership fee of R200.

My preferred method of communication is:

Email Whatsapp Sms

Signature

Name

Date

BANKING DETAILS:

Please see below the details for the South African National Arts Therapies Association (SANATA).

NEDBANK

Account number : 1196485046

Branch code : 16214500

Type of account : Business PAYU

Reference : Name and Surname