

The United South African Neonatal Association - USANA

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APPLICATION FOR MEMBERSHIP

Full Members: All doctors based in South Africa who are registered with the Health Professions Council of South Africa (HPCSA) and have a special interest or involvement in neonatal medicine.

Affiliate Members: Individuals who do not qualify for another category of membership may apply for Affiliate Membership if they are involved with the health and well-being of South African newborns. Affiliate membership will not be given to individuals in their capacity as representatives of sponsors or commercial companies.

Title.....

First Name.....Last name.....

Postal Address.....

Main Practice Physical Address.....

Nationality.....

Qualifications.....

HPCSA / Professional number (if not HPCSA then state which professional group).....

.....

Telephone: (w).....

Cell Phone (For rapid sms communications).....

Preferred Email.....

I am Registered as a neonatologist with the HPCSA	Yes / No
Registered as a paediatrician with the HPCSA	Yes / No
A full member of the South African Paediatric Association	Yes / No
A full member of the South African Medical Association	Yes / No
A full member of the Neonatal Nursing Association of SA.	Yes / No

I hereby apply for membership of The United South African Neonatal Association.

I agree to abide by the constitution and rules of the United South African Neonatal Association and to pay the annual subscription: *R200 for full members and R50 for affiliate members*

Signature:.....Date:.....

Instructions / Notes

1. Please print clearly.

2. Complete ALL fields. Communication in this group is via email. An email address is essential.

3. Deposit the annual fee into the USANA bank account:

Account Name: United South African Neonatal Association

Bank : Nedbank

Account Number: 1046522809

Branch Code: 104609

4. Send this application and your proof of payment to Dr Y Joolay: yaseen.joolay@gmail.com or fax 086 599 2642

5. On receipt of the above, you will be sent a username and password.