

The South African Gastro-Intestinal Nurses Society

 (affiliated to the South African Gastroenterology Society)

 **Membership Application**

Name and Surname : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Qualifications : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact details

Work Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone numbers : (Work) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(home) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Fax) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Cell) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (E-Mail) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NEW MEMBER JOINING FEE R100,00 (FULL MEMBER) OR R80,00 (ASSOCIATE MEMBER)

***Please tick the appropriate box***

**FULL MEMBERSHIP :**

 Joining fee – R100,00

 Annual maintenance fee – R50,00

Registered nurse who pays the prescribed membership dues; is a fully paid up member of the South African Nursing Council and presently involved in the field of gastroenterology.

Enrolled nurses who have paid the prescribed dues and are fully paid up members of the South African Nursing Council.

**ASSOCIATE MEMBERSHIP :**

 Joining fee – R80,00

 Annual maintenance fee – R30,00

Any non practicing or retired registered nurse who is not a fully paid up member of the South African Nursing Council and has an interest in the field of gastroenterology.

A diploma or degree or certificate in the health science field or special interest in Gastroenterology Provision shall be made for associate members to health organisations and individuals who are not members of the South African Nursing Council.

**CORPORATE MEMBERSHIP :** - R3 000,00 per annum

Our corporate sponsors are automatically included in our mailing list, and will receive all our news letters, updates and notification of events. They will also be included in the nurse’s program at the SAGES Congress.

**Payment should be made directly into the SAGINS Bank Account :**

Account Name : Sagins Fund

Bank : Standard Bank

Branch : Mowbray

Branch Code : 4909

Account No.: 07 334 5857

All deposit slips/transfer slips to be faxed to (012) 993-3296, attention Liezl Veldman.