



NEONATAL NURSING ASSOCIATION OF SOUTHERN AFRICA

RENEWAL MEMBERSHIP FORM

Please submit your form, once completed for Att: **Sithembile Khathi** fax number **031 303 9529** / E-mail: **sithembile@confco.co.za**

How you benefit

- Membership of the NNASA
- COINN Membership
- Professional nursing today subscription
- Discounted registration at national conference
- Quarterly newsletter
- Support and guidance via telephone or email
- Standardised guidelines (coming soon!)
- Part of a local network through regional branches and contacts
- NNASA website for online resources, upcoming events and your stories
- Stay in touch with other members and receive updates via Facebook:
- Face book Name : Nnasa Neonatal Nurses

-How you can be a more active member:

- Start a new local branch or become involved in your local branch
- Email us your challenges and successes to share with other nurses via our newsletter or website
- Share your story. Send us pictures of your unit and tell us about your innovations and achievements

MEMBERSHIP FEES

Annual Membership Fee R150.00 (From 1 March 2011 – 28 February 2012)

Its renewal time again. We really value your membership and participation-thank you. Your annual fees help us to achieve our goal of improving neonatal care by supporting neonatal nurses. Please give us feedback on how NNASA can serve you better

PERSONAL DETAILS

Title	
Surname/Family Name	
First Name	
Organisation/Institution	

Please complete this section if your details have changed:

Physical/Postal Address	
Country	
Telephone Number	
Facsimile Number	
Mobile Number	
Email Address	

Preferred Means Of Communication	<input type="checkbox"/> SMS <input type="checkbox"/> Email <input type="checkbox"/> Fax
Indicate with X Please invoice me for 2011-2012 Membership	
Are you prepared for us to share your contact details with other nurses in your area.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Signature: _____ Date: _____

Payment Details:

Please kindly indicate your intended method of payment:

Bank Deposit

Electronic Transfer:

Cheque

Please ensure that all transfers make clear reference to the member that it is being paid for (name and surname) as well as your membership number.

Fax or email this Membership Renewal Form along with proof of payment. Without proof of payment, you will not be received.

Terms & Conditions

*The membership fees will be applicable for the period: 1 March 2011 to 28 February 2012

*No membership will be confirmed without payment.

*Please ensure all transfers make clear reference to the delegate being paid for (reference Number)

*Once payment has been made, proof of payment is to be faxed or e-mailed through for the attention of: Sithembile Khathi +27 31 303 9529 / email Sithembile@confco.co.za

*Confirmation of payment received will be provided in the form of an official receipt. Without proof of payment you will not be receipted and your membership card cannot be processed.

Privacy Statement

We collect information that you voluntarily provide, in order for us to process memberships and other transactions you may request, and provide a customer service.

We use your information to inform you of updates and send you relevant information regarding the concerned event.

We do not sell, rent, or lease our delegate lists to third parties. In order to help provide our services, we occasionally provide information to other companies that work on our behalf. The Conference Company shall take all reasonable steps to protect the personal information of Users. For the purpose of this clause, "personal information" shall be defined as detailed in the Promotion of Access to Information Act 2 of 2000 (PAIA). The PAIA may be downloaded from: <http://www.polity.org.za/html/govdocs/legislation/2000/act2.pdf>

The Membership Secretariat
The Conference Company
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 E-mail: sithembile@confco.co.za