

TITLE			
SURNAME			
FIRST NAMES			
ID NO.			
POSTAL ADDRESS			
TELEPHONE NUMBERS	HOME		
	WORK		
	FAX		
	CELL		
E-MAIL			
LABORATORY/UNIV. NAME			
OCCUPATION	Please Tick	YEAR OF STUDY	Please Tick
CONTRACTOR	<input type="checkbox"/>	1 ST YEAR	<input type="checkbox"/>
EMPLOYEE	<input type="checkbox"/>	2 ND YEAR	<input type="checkbox"/>
LECTURERS	<input type="checkbox"/>	3 RD YEAR	<input type="checkbox"/>
STUDENT	<input type="checkbox"/>	4 TH YEAR	<input type="checkbox"/>
LABORATORY OWNER NAME			
DENTASA MEMBERSHIP NO.			
TE (SADTC) NO.			
WOULD YOU LIKE TO RECEIVE E-ALERTS?		WOULD YOU LIKE TO RECEIVE SMS'S?	
Yes, I would like to receive the communication e-mail <input type="checkbox"/>		Yes, I would like to receive the sms communication <input type="checkbox"/>	
No, I do not want to receive the communication e-mail <input type="checkbox"/>		No, I do not want to receive the sms communication <input type="checkbox"/>	
<p>Please note: Different information is communicated through e-mail and sms. You will not receive the same information through e-mail and sms communication. It is your responsibility to inform the office should any changes occur in your personal details, especially your e-mail address and cell phone number.</p>			
<p>DENTASA membership lapses annually on 28th February. Membership is to be renewed annually from 1 March. The annual membership fee of laboratory owners is R900.00, employees & lecturers R450.00. Students "Free" New members pay R100.00 once off joining fee (Excluding Students)</p>			
<p>Bank details for direct deposits, and/or electronic payments: Account holder name: Dental Technology Association of South Africa Bank: ABSA Bank, Brooklyn Account number: 15-0018-4686 Branch code: 63-03-45</p>			