



**South African Society  
of  
Hand Therapists**

**MEMBERSHIP FORM 2010**

**PLEASE ENSURE THAT THIS FORM IS LEGIBLE AND COMPLETELY FILLED  
OUT EVEN IF INFORMATION HAS NOT CHANGED**

**Title:** \_\_\_\_\_ **Surname:** \_\_\_\_\_

**Full Name:** \_\_\_\_\_

**Preferred name for correspondence:** \_\_\_\_\_

**Profession:** \_\_\_\_\_ **HPCSA No:** \_\_\_\_\_

**SASHT No:** \_\_\_\_\_

**Postal Address:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ **Code:** \_\_\_\_\_

**Physical Work Address:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Region of Physical Work Address: (Please circle appropriate area)**

**CAPE:** CT Northern Suburbs  
CT Southern Suburbs  
South Coast  
Winelands  
Overberg

**GAUTENG:** **EAST RAND**  
**JOHANNESBURG** West  
Central  
North  
South  
East

**SOUTH GAUTENG**  
**LIMPOPO**

**EASTERN CAPE**  
**FREE STATE**

**KZN:** Durban - North  
Durban - West  
Durban - East  
Durban - South  
**Pietermaritzburg**  
**North Coast**  
**South Coast**

<b>MPUMALANGA:</b>	Middelburg Nelspruit Witbank Baberton	<b>PRETORIA</b>	Central North Centurion East West South
<b>NORTH WEST</b>	_____		
<b>NORTHERN CAPE</b>		<b>INTERNATIONAL</b>	

**CONTACT DETAILS**

Work: (\_\_\_\_) \_\_\_\_\_  
 Home: (\_\_\_\_) \_\_\_\_\_  
 Fax: (\_\_\_\_) \_\_\_\_\_  
 Cell: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

I agree to abide by the rules of the South African Society of Hand Therapists Constitution (this can be obtained from [www.sasht.org.za](http://www.sasht.org.za))

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**MEMBERSHIP FEE STRUCTURE**

(please circle the appropriate one)

International Member (if postal address is overseas)	R350.00
New Member:	R330.00
Full Member Renewed subscription:	R300.00
Late Registration Full member (after 31 March 2008)	R330.00
Student member:	R210.00
Associate Member:	R210.00

**BANKING DETAILS**

Standard Bank  
 Branch: Jan Smuts Avenue  
 Branch Code: 00 42 05  
 Account Number: 01 277 735 8

Please deposit your membership fees in the SASHT bank account.  
 And fax proof to Renske de Lange 013 692 6029 OR 086 613 2230

Email to: [admin@sasht.org.za](mailto:admin@sasht.org.za) OR

Post to: SASHT  
 : P.O. Box 41266  
 : Reyno Ridge  
 : 1049

**\*\*Cheques to be made out to South African Society of Hand Therapists**  
**\*\*Cash deposits to include R10 to cover bank handling costs**