



SANA
South African Naturopathy Association

Contact details:
info@sanaturopathy.org

Dr. Stephen Farrugia – Chair
Dr. Chase Webber – Vice Chair
Dr. Adele Pelteret – Secretary
Dr. Sandi Nye – Treasurer

Membership RENEWAL Form 2018

I hereby apply for personal membership renewal to the South African Naturopathy Association (SANA).

Surname: _____ First name(s): _____

Telephone No's: _____ Cell No: _____

Preferred E-mail address : _____

AHPCSA registration no# : **A** _____ BHF practice no#: _____

Areas of special interest or practice (if any change): _____

FEES 2018

†copy of ID required

Annual membership fees:

- **R 700** for practitioners. **R600** if paid before 28 Feb 2018.
- **R 500** for practitioners over 65yrs of age. † **R400** if paid before 28 Feb 2018.†
- **R 400** for those practitioners in 1st year of practice (ie: graduating 2018). **R300** if paid before 28 Feb 2018.
- **R 100** for UWC student members.

I would like to apply for my membership renewal as a: (tick the appropriate box)

☐

Practitioner

☐

1st year of practice

☐

UWC student member

☐

Over 65 yo†

I have paid my fee via: (tick the appropriate box)

☐

Personal cheque (+R20 additional for bank charges)

☐

Internet banking (Electronic Transfer / EFT)

Please post, or scan & email the completed and signed application with the appropriate proof of payment (POP) to:

info@sanaturopathy.org

OR

SANA Membership
Care of: Dr Adele Pelteret
Natural Medicine Centre
PO BOX 432,
Howard Place, Pinelands, 7450
Cape Town

OR hand deliver to:

SANA Membership
Care of: Dr Adele Pelteret
Natural Medicine Centre
6 The Fairway
Pinelands, 7405
Cape Town

BANK DETAILS:

ABSA – Account # 4064855259
Branch 6960
Cape Town

I declare all my details stated within this document are correct and binding:



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Full name: _____ Signature: _____

on this _____ day of _____ 2018, at place: _____