

SAMA Conference 2008 - Registration Form

ON COMPLETION PLEASE FAX TO: 012 481 2100

STEP 1 : Personal Details

Title:* Initials:*

Badge name:* Surname:*

HPCSA Registration Number: SAMA Membership No:

Institution/Practice/Company:

Postal Address:*

Work Tel. No:* Work Fax No:

Cell Number: * E-mail:*

If you require a tax invoice, please provide your VAT no:

Meal requirements: No special requirements: Kosher: Halaal: Vegetarian:

Other meal requirements:
Please specify

Special requirements:
e.g. physically disabled

Other requirements:

* Compulsory to complete

STEP 2 : Social Programme

Friday 29 August 2008

Registration deadline: 30 July 2008

President's Gala dinner: Will attend: Will not attend: Number of people:

Name and Surname of attendee's:

Saturday 30 August 2008

Registration deadline: 30 July 2008

Cocktail party: Will attend: Will not attend:

STEP 3 : Select Fees

	Early Bird Registration (before 30 June)	Late Registration (after 30 June)
SAMA Members	R 650.00	R 1,000.00
Non-members	R 1,200.00	R 1,600.00

Note: To qualify for early bird registration we need to receive both your registration form and payment by 30 June at the latest.

STEP 4 : Payment Details - Please select your payment option below:

EFT / Direct Bank Deposits:

You may deposit directly into our bank account. The details are:

Bank: Nedbank Account name: South African Medical Association

Branch: Hatfield Account number: 1602 237 387

Please fax or post a copy of the deposit slip together with your registration form to + 27 12 481 2095.

Cheque

Please make cheques payable to: South African Medical Association and post, together with a copy of your registration form to:

The Finance Department - Attention: Molly Tlhaku

P O Box 74789, Lynnwood Ridge, 0040