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2019 SANEA MEMBERSHIP: APPLICATION FORM

I/We hereby apply to SANEA, for membership:

		MEMBERSHIP CATEGORIES	ANNUAL FEES	Representatives	Tick Applicable					
1		aining Members enefits and fees are negotiable	Negotiable above R401 250-00	50x						
2		Corporate Members								
	2a	Gold Category	R117 400-00	30x						
	2b Silver Category		R59 500-00	10x						
	2c	Bronze Category	R18 150-00	5x						
	3	Associate Members Associate Membership is restricted to organisations with public benefit objectives	R2 925-00	2x						
4		Affiliate / Individual Members								
	4a	Full Member	R1 400-00	1x						
	4b	Youth Member Aged 35 years or younger	R700-00	1x						
	4c	Student Member Recognised Academic Institution Aged 35 years or younger	R350-00	1x						
	4d	Retired Member Aged 65 years or older	R280-00	1x						

(All fees are stated including 15% South African VAT)



,.			ans of the Lead Representat	ive.			
Lead Representati	ve (All Cate)	gories):	I				
Title:		Name:		Surname:			
Company:				Designation:			
Age Group:	18 – 34 35 - 44 45 – 64 65 and older			Qualifications:			
Industry Sector:		/ Coal Liquid Fuels Hydro Wind Solar Oil Nuclear Gas Financial ent Consulting Other					
Province:			State Gauteng KwaZulu-l n Cape Other	Natal Limpopo	Mpumalanga Northern Cape		
Cellular:				Telephone:			
E-mail:							
Postal Address:							
VAT No: (if applicable)				Postal Code:			
Additional Informa	ntion for You	uth, Student	t & Retired Membership App	lication:			
Youth: Aged 35 years or yo	unger	Birth Date:		ID Number:			
Student: Recognise Academic Institution Aged 35 years or yo	ed	Birth Date:		ID Number:			
Retired: Aged 65 years or old		Birth Date:		ID Number:			
		ease email c	copies of your ID / Student C	ard to: <u>sanea@sa</u>	anea.org.za		
I/We pledge my/o	ur support t	o the South	n African National Energy As	ssociation in purs	uit of its goals.		
Signature:				Date:			
Account Person's							
Title:		Name:		Surname:			
Telephone:				Facsimile:			
E-mail:				Cellular:			

Thinking Energy Page 2



SANEA BANKING & PAYMENT DETAILS									
Please choose OPTION 1 , OPTION 2 or OPTION 3 in the appropriate box below:									
<u>OPTION 1</u> : BANK TRANSFER / EFT	tran For	Please specify your / company name and membership on your bank transfer/EFT. Forward to: SANEA SECRETARIAT: sanea@sanea.org.za ABSA Branch: 631005 Account: 38026133715							
OPTION 2: CREDIT CARD	Please complete the following authorization for the SANEA SECRETARIAT to debit your credit card:								
I, the undersigned, do hereby authorize PerryReyneke to debit my Credit Card for the amount stated below. Please email a copy of the front and back of your credit card to the SANEA SECRETARIAT: sanea@sanea.org.za									
Membership Fees TOTAL:				ZAR					
Credit Card Type X	Master		Visa		Diners		Amex		
Credit Card Number					Expiry Date				
Cardholder's Name					3 Digit number on reverse side where applicable				
Cardholder's Signature					Date of Signature				
OPTION 3: ONLINE PAYMENT	Once you completed the membership application form online, an automated tax invoice will be emailed to you with a hot link for secure online payments via PayFast								
Please e-mail the completed membership application form to the SANEA SECRETARIAT at sanea@sanea.org.za . The confirmation of receipt and a tax invoice will be forwarded to you via e-mail.									

Thank you for your support and welcome on board!

For additional information please contact: Sarita Cronjé
Cell: +27 (0)83 325 6716 | E-mail: sanea@sanea.org.za | Website: www.sanea.org.za

Thinking Energy Page 3