



APPLICATION FOR SASS MEMBERSHIP

* Title		Initials		Surname	
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This section is for record purposes only & will be treated as private & confidential

Full First Names						
Name						
Personal Cell (Members Login)						
Personal E-mail (Members Login)						
Name of Spouse						
Home Address						
					Code	
Home Telephone	Code					

* This section will appear on [Find a Doctor] of the SASS website for public search purposes *

Profession * (work speciality)						
Abbreviated Qualifications *						
Business Physical Address *						
					Code	
Business Postal *						
					Code	
Business Telephone *	Code					
Business Cell *						
E-mail / Fax *						
Business Website *						



CURRICULUM VITAE OF APPLICANT

This section is for record purposes only & will be treated as private & confidential

Personal Details

Surname	
Title	
Full First Names	
ID Number	
Date of Birth	
Country of Birth	

Secondary Schooling

Name of School	
Country	
Year Completed	

Undergraduate Medical Training

University/Medical School	
Years in Trainings	
Degree Awarded	
Year Completed	

Work / Post Graduate Experience

Hospital 1	
Post Held	
Dates	
Hospital 2	
Post Held	
Dates	
Hospital 3	
Post Held	
Dates	

Post Graduate Training

University/Medical School	
Years in Training	
Degree/Diploma Awarded	
Year Awarded	
Country	



Registrations

Country		Date	
Registration Number			

Speciality Registration

Work Speciality			
Country		Date	
Registration Number			

I wish to apply for

Full Membership

Emeritus Membership

Associate Membership

Affiliate Membership

Extraordinary Membership

Signature

Date

Proposer (Sign & Print Name)

SASS Membership Number

Secunder (Sign & Print Name)

SASS Membership Number

Please complete all details. Incomplete applications cannot be processed.

Enclose certified copies of any relevant documents, information and attach recent photograph of yourself.

Scan all docs in Pdf format & E-mail to membership@saspine.org

For office use only

Application Received

Application Acknowledged

Date Elected

Date Notified

Computerised

Application / Membership Number

Correspondence Returned

Reason

NB

All members info marked with an * asterisk will appear on the [Find a Doctor] pages of the SASS website www.saspine.org. Please update directly online at the Members Only section or contact us at membership@saspine.org



THE SOUTH AFRICAN SPINE SOCIETY

www.saspine.org

(Section 21: 2003/010352/08)

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Email a recent photo of yourself in Jpeg format
separately to membership@saspine.org