



NATIONAL PROFESSIONAL TEACHERS' ORGANISATION OF SOUTH AFRICA (NAPTOSA)

APPLICATION FOR MEMBERSHIP – NAPTOSA WESTERN CAPE – 2018

PLEASE RETURN FORM TO: The Chief Executive Officer,
NAPTOSA Western Cape 6 Park Road, RONDEBOSCH 7700

Email: infowc@naptosa.org.za; Tel: 021 686 8521 Fax: 021 689 2998

TITLE	Prof		Dr		Mr		Mrs		Miss		Ms	
SURNAME									GENDER		M / F	
INITIALS									ID NUMBER			
FIRST NAMES (in full)												
PERSAL NUMBER									(Also applicable if previously State-employed)			
DATE OF BIRTH	d	d	/	m	m	/	y	y	y	y	SACE	
HOME ADDRESS (POSTAL)											CODE	
TEL with CODE									CELL			
Personal EMAIL												
Are you resigning from another union?									Y / N		(Delete what is not applicable.)	
Do you have a Group Scheme policy with Old Mutual									Y/N		or Metropolitan?	Y/N

SCHOOL/COLLEGE/ OFFICE									PAYPOINT			
ADDRESS (of institution) (POSTAL)											CODE	
TEL with CODE (work)												
FAX with CODE (work)												
E-mail :												
PERMANENT	Tick box		or	TEMPORARY	Tick box							
TERMINATION DATE OF TEMP APPT (IF APPLICABLE)												
EDUCATOR (Please tick):				PUBLIC SERVANT (Please tick):								
EDUCATOR (CS) Primary				ADMINISTRATIVE								
EDUCATOR (CS) Secondary				DOMESTIC								
THERAPIST				GENERAL ASSISTANT								
PSYCHOLOGIST				NURSE								
TVET COLLEGE LECTURER				SOCIAL WORKER								
EMPLOYED BY:	WCED/DHET		SGB/COUNCIL		INDEP SCH							
My membership fee of R 97.00 per month will be paid to NAPTOSA by:												
WCED / DHET			SCHOOL/COLLEGE		SELF							
NB Write your name in Reference blocks on deposit slip and fax us proof of payment.												

APPLICANT'S SIGNATURE		DATE	
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STOP ORDER (STATE EMPLOYEES ONLY)

To: Head: Education
WESTERN CAPE EDUCATION DEPARTMENT /
DEPARTMENT OF HIGHER EDUCATION AND TRAINING

I, the afore-mentioned, and undersigned, hereby authorise you to deduct monthly from my salary my subscription due to the National Professional Teachers' Organisation of South Africa (NAPTOSA) R 97.00 (Ninety Seven Rand per month,

Or such subscription as is determined from time to time by NAPTOSA and pay it to NAPTOSA [PERSAL Table 139 Code 0026]. I understand that any correspondence in connection with this stop order must be directed to NAPTOSA Western Cape.

SIGNATURE

DATE

NB • DO NOT SEPARATE THE TWO HALVES OF THE PAGE.

- If employed by the WCED / DHET, please sign the stop order above.
- If employed by an INSTITUTION, please pay by bank debit order or request your bursar to deduct your fees from your salary and pay to NAPTOSA every month.

**DO NOT SEND THIS FORM DIRECT TO
THE EDUCATION DEPARTMENT OR SCHOOL BURSAR**

DETAILS OF THE RECRUITER (Complete this section if applicable. A Recruitment Incentive is payable to members only if full details required for tax purposes are supplied.
YOU MAY NOT RECRUIT YOURSELF!

SURNAME												
FIRST NAMES												
ID NUMBER												
TAX NUMBER												
MARITAL STATUS	Married		Not married									
E-MAIL ADDRESS												
CELL PHONE NUMBER												
SCHOOL												
RECRUITER'S BANK DETAILS for payment of recruitment fee (Please write clearly.)												
BANK NAME												
BRANCH NAME									BR. CODE			
ACCOUNT NUMBER												
Have you recruited other members in the last 6 months?									YES		NO	