

NATIONAL PROFESSIONAL TEACHERS' ORGANISATION OF SOUTH AFRICA



APPLICATION FOR MEMBERSHIP IN KWAZULU-NATAL (NAPTOSA KZN) 2018

RP1

Block A, Canford Park, 53 Anthony Rd, Umgeni Park, 4051
 P O Box 35613 Ph 031 563 1966
 Northway 4065 Fax ###
 e-mail: kzn@naptosa.org.za website: www.naptosa.org.za

Complete the following Sections: ****Incomplete Forms NOT Accepted****
 State Employed Applicant

A	B	C	D	F
A	B	C	D	G

 Recruiter: The person introducing you E
 SGB/ College Employed Applicant

Send form to: The Chief Executive Officer, NAPTOSA KZN, P O Box 35613, Northway, 4065 Fax: 031 563 1611
****DO NOT SEND THIS FORM DIRECT TO AN EDUCATION DEPARTMENT OR SCHOOL BURSAR****

Please accept this application for membership of NAPTOSA ****PLEASE PRINT IN BLOCK LETTERS****

Section A - My Details Are:

Title (Tick)

Prof	Dr	Mr	Mrs	Miss	Ms
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 Surname _____
 Initials _____
 First Names (In Full) _____

PERSAL No. _____ Applicable if State-employed
 ID No. (Bar Coded ID Only) _____ Date of Birth

Y	Y	Y	Y	M	M	D	D
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 Home Address (Postal) _____

 _____ Code _____

Tel _____ Code _____ No. _____
 Cell Number _____
 e-mail address _____

At ALL times it is the responsibility of the member to ensure that his/her membership fees are up-to-date.

Section B - I am Employed at:

School/ College/ Office _____
 Postal Address _____
 _____ Code _____

Paypoint No. _____
 Tel _____ Code _____ No. _____
 Fax _____ Code _____ No. _____
 e-mail _____

Type of Employment (Tick)

Permanent	Temporary
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 Termination date of Temp

Y	Y	Y	Y	M	M	D	D
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(Compulsory if Temp)

Section C - In the Capacity of:

Teaching Staff Principal <input type="checkbox"/> Educator (CS) <input type="checkbox"/> Therapist <input type="checkbox"/> Psychologist <input type="checkbox"/>	Public Servant Administrative <input type="checkbox"/> Domestic <input type="checkbox"/> General Assistant <input type="checkbox"/> Nurse <input type="checkbox"/> Other <input type="checkbox"/> Specify _____
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Office Use:
 Date Rec'vd:.....
 Mem.No.:.....
 Date Processed...../...../.....
 RP2 Ref...AP/...../.....
 Pymt Ref.....

Employed By
 Education Dept. SGB/ Council Independent School

Section D - My Membership Fees will be paid to NAPTOSA by:

Education Dept. School/Council Self *(Debit Order-Complete Section G)*
 Cheq made Payable to "NAPTOSA KZN". Self Cheq Enclosed for Fees due till 31.12.2018
 Unpaid Cheque Bank Charges for Your Account. Post Dated Cheques NOT Accepted.

