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[www.sapayroll.co.za](http://www.sapayroll.co.za)

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## MEMBERSHIP APPLICATION FORM

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Please complete this form and fax to 011 789 2116. This application form can also be completed online at our website: [www.sapayroll.co.za](http://www.sapayroll.co.za).

### PERSONAL DETAILS:

TITLE:	SURNAME:
FIRST NAMES:	
POSTAL ADDRESS:	
TELEPHONE NUMBER:	FAX NUMBER:
EMAIL ADDRESS:	CELL NUMBER:

### COMPANY DETAILS:

COMPANY VAT REGISTRATION NUMBER:	
COMPANY NAME:	
PHYSICAL ADDRESS:	
POSTAL ADDRESS:	
TELEPHONE NUMBER:	FAX NUMBER:
CONTACT PERSON:	EMAIL ADDRESS:
NO. OF EMPLOYEES:	TYPE OF BUSINESS:

### MEMBERSHIP DETAILS:

CORPORATE MEMBER (YES / NO) R 3,192.00 INCLUSIVE OF VAT PER ANNUM.	INDIVIDUAL MEMBER (YES / NO) R 690.00 INCLUSIVE OF VAT PER ANNUM.
If you require further information in this regard, please call the SAPA Secretariat on (011) 789 1384 or email at: <a href="mailto:sapa@vdw.co.za">sapa@vdw.co.za</a>	