

APPLICATION FOR MEMBERSHIP

PROFESSION			-
TITLE			-
NAME			-
SURNAME			
ID NUMBER			
HPCNA NR			
POSTAL ADDRESS			-
PHYSICAL ADDRESS			
TOWN			_
WORK PHONE			_
CELL			-
E-MAIL:			_
۱	(Name in F	Print) ID	
Hereby apply for membe	ership of the Namibia Privat	e Practitioners For	um.
	wledge the rules and regula I The Memorandum of Asso		and commit to said rules and PF.
Signed at	on this	Day of _	20'
SIGNATURE AS USED FO	R SIGNING CHEQUES		

Banking Details

Bank Windhoek – Maerua Mall Branch

Branch Code : 483872

Account Number: 8003212383

Account Name : Namibia Private Practitioners Forum

Please inform us if you will be paying by Electronic Transfer or Debit order.

Electronic Transfer: Send a proof of payment each month.

Debit order: Send a copy of the debit order.

Use your <u>name</u> and <u>surname</u> as <u>reference</u> this is very important to help us keep record of payments!!!

Contact Details:

Hester van den Heever

Tel : 063- 225003

Fax: 063 - 222458

Email : <u>nppfhome@gmail.com</u>