



APPLICATION FORM FOR SAALED MEMBERSHIP - 2022

Please Indicate your type of membership:

Individual
Membership:

School Membership:

Please complete the following:

Title:	
Surname:	
First Name:	
School / Organisation:	
Profession:	
SACE Number:	
HPCSA Number:	
Cell Number:	
E-mail address:	
Town/Province:	
Specialisation:	
Signature:	

Fee Structure:

Individual
Membership: R 250.00 per annum
School Membership: R 1 500.00 per annum

Banking Details:

Account Name: S A Assoc of Learning and Education
Bank: FNB
Branch: 250655
Account Number: 62046846020