



SOUTH AFRICAN NEPHROLOGY SOCIETY MEMBERSHIP UPDATE / RENEWAL 2021

Please complete all sections

SANS membership provides collective ISN membership

Title:		Surname:	
First Names:		HPCSA no.:	
Hospital/Centre:		Date of birth:	
Physical Address:			
Town/City:		Postal code:	
Province:		Country:	
Telephone:		Mobile:	
Email:		Fax:	
Sector:	<input type="checkbox"/> Based in public/academic sector		<input type="checkbox"/> Based in private sector
Category of registration and field of practice:			
Registered Adult Nephrologist		Registered Paediatric Nephrologist	
Specialist Physician		Specialist Paediatrician	
Trainee in Nephrology, Internal Medicine or Paediatrics – please specify		Corporate	
Other Medical Practitioner – specify		Honorary (life-long, free membership)	
Scientist – specify field of interest		Details:	
Current areas of activity (please check all that apply): <input type="checkbox"/> Am <u>not</u> active at present (e.g. retired)			
<input type="checkbox"/> Clinical nephrology <input type="checkbox"/> Teaching nephrology <input type="checkbox"/> Research in nephrology			
CATEGORY OF MEMBERSHIP (Please mark with an X)			
Ordinary SANS Membership (R3850)		1 st Year Trainee/Fellow – Free	
Associate SANS Membership (R1210)		2 nd & 3 rd Year Trainee/Fellow – 50% (R1925)	
I am an Honorary SANS Member (Free)			
I agree to abide by the Charter of members of SANS (Charter available here) <input type="checkbox"/>			
Applicant signature:		Date:	

SA Renal Society Bank details:

FNB cheque account, account number 62195900553, N1 City branch, code 200410.

Include reference **SANS** followed by **your name**, for tracking purposes, and send proof of payment to Sharon Beeming at sharonb@turnerssecretariat.co.za

For queries, email Sharon Beeming or call the SANS secretariat at 031 368 8000.