

**PUBLIC RELATIONS INSTITUTE OF SOUTHERN AFRICA**

**APPLICATION FOR AFFILIATE REGISTRATION (OUTSIDE SOUTH AFRICA)**

**YOU WILL BE REGISTERED AS AN AFFILIATE IF COMPLETING THIS FORM.  
TO UPGRADE PLEASE COMPLETE THE FULL FORM & FURNISH YOUR CV AND CERTIFIED COPIES  
OF ACADEMIC QUALIFICATIONS**

*PLEASE TYPE OR USE BLOCK CAPITALS TO COMPLETE ALL DETAILS ON THIS FORM LEGIBLY – INFORMATION REQUIRED BY ALL CITIZENS FOR GOVERNMENT STATISTICAL PURPOSES (SAQA RECOGNITION OF PRISA LEVELS OF DESIGNATIONS)*

Title: ..... First name: ..... Other: ..... Surname: .....

ID No: ..... Alternative ID type: eg Passport: ..... No: .....

Date of birth: Y ..... /M ..... /D ..... Nationality: .....

Citizen Resident Status: Permanent Resident  South Africa  Dual (SA plus other)  Other  Unknown

Gender: Male  Female  Disability: None  Sight  Hearing  Physical  Other

Equity: Black  Coloured  Indian/Asian  White  Other  Home Language: .....

Name of Company: ..... Invoice Address: ..... Code: .....

Company VAT registration no: ..... Personal postal address: ..... Code: .....

Personal physical address: ..... Province: .....

Work : (.....) ..... Cell : ..... Alternative No: .....

E-mail : ..... (please print clearly)

Designation : ..... Date taken up present appointment: Y ..... /M ..... /D .....

To whom in your company do you report to?: .....

**INDICATE YOUR OCCUPATIONAL CLASSIFICATION:**

	SENIOR MANAGEMENT	MIDDLE MANAGEMENT	SUPERVISORY	NON-MANAGEMENT
Corporate	<input type="checkbox"/> 01	<input type="checkbox"/> 02	<input type="checkbox"/> 03	<input type="checkbox"/> 04
Consultant	<input type="checkbox"/> 05	<input type="checkbox"/> 06	<input type="checkbox"/> 07	<input type="checkbox"/> 08
Education - Teaching	<input type="checkbox"/> 09	<input type="checkbox"/> 10	<input type="checkbox"/> 11	<input type="checkbox"/> 12
Government	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

**STATEMENT BY APPLICANT:**

*"In applying for registration as a member of PRISA - The Institute for Public Relations & Communication Management Southern Africa, I attest to the accuracy of the information in this application and to the fact that public relations is the primary function of my present position. I agree to and understand the Institute's Code of Professional Standards for the Practice of Public Relations and, if accepted, pledge to adhere to this code and to the Constitution PRISA - The Institute for Public Relations & Communication Management Southern Africa and all its bylaws. I pledge to do everything in my power to maintain and enhance the prestige and practice of public relations".*

**By signing below, I agree/disagree to receive PRISA's professional communication by electronic messaging e.g. email & sms.**

SIGNED: .....

DATE: .....

**REGISTRATION DETAILS**

PRISA annual registration fees afford membership of the Institute from January to December of each year. New applicants pay the annual fee of **R1985.00** excluding VAT. Members, who register after June 30, pay 50% of the total annual subscription. Members are invoiced end October for the following year's subscription. **You will be registered as an Affiliate. If you wish to be registered at the correct level please ask for the full registration form.**

**Bank details:** Account holder: PRISA; Account No: 1965 206 298; Universal code: 198765; Swift code: NEDSZAJJ; Branch: Nedbank Braamfontein

THE MEMBERSHIP FEE OF R ..... HAS BEEN PAID BY EFT  DIRECT DEPOSIT

**How did you hear about Prisa?**

**Friend/colleague (name) ... Other: eg Website .....**

PRISA P O Box 2825 Pinegowrie 2123 TEL: 011 326 1262 Website: www.prisa.co.za e-mail: membership@prisa.co.za