

CONGRESS 2016 REGISTRATION FORM

*Please rather download the electronic registration form at <http://www.amesa.org.za/AMESA2015/>
Then you can type in Word and e-mail it to us and we can copy and paste to minimise errors*

CONTACT DETAILS (please print)

Title:	First Name:	Surname:
Postal Address:		
Postal Code:		Province:
Institution:		Your e-mail address (our preferred mode!):
Cell:	Tel:	Fax:

Are you a current paid-up AMESA member? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please provide your membership number for us to check: .. If No, please complete the membership form and include the membership fee here:	R
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REGISTRATION FEE

Early Registration: R900,00 (by 30 April)	R					
Normal Registration: R950,00 (1 May to 31 May)	R					
Late Registration: R1 300,00 (after 31 May)	R					
Day Visitors@ R300,00/person/day	R					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Mon</td> <td style="width: 15%;">Tues</td> <td style="width: 15%;">Wed</td> <td style="width: 15%;">Thurs</td> <td style="width: 15%;">Fri</td> </tr> </table>	Mon	Tues	Wed	Thurs	Fri	
Mon	Tues	Wed	Thurs	Fri		
Congress materials for day visitors can be pre-ordered only until 10 June at R360						

HOSTEL ACCOMMODATION including breakfast (please mark with an X)

Single @ R350/person/night	26 June	27 June	28 June	29 June	30 June	R
Sharing @ R350/person/night	26 June	27 June	28 June	29 June	30 June	
Roommate's name:						

EVENING FUNCTIONS

Tuesday 28 June: Cultural evening (R200)	R
Thursday 30 June: Gala dinner (R360)	R

EXCURSIONS (choose *only one* and mark with an X)

Kruger R300,00 (1)	Jeppe's reef R250,00 (3)	Sudwala Caves R170,00 (5)	R
Echo caves R350,00 (2)	Bourke's luck R300,00 (4)		

MEMORABILIA (Please mark with and X) Note: Payment must be received by 10 June

Bomber Jacket (R360) Please mark required size with X	Golf shirt (R200) Please mark required size with X	Scarf (R80)	Cap (R80)	R														
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S	M	L	XL	2XL	3XL	4XL												
S	M	L	XL	2XL	3XL	4XL												

TRANSPORT to/from Tshwane University of Technology (Mbombela): mark with an X

I would like to book transport to and/or from:	Kruger Airport (R100,00 one way)	Mbombela bus terminus (R30,00 one way)	Mbombela train station (R30 one way)	R	
Arrival: preferred transport time	Sunday 26 June		Monday 27 June		
	13:00	15:30	18:40		08:00 10:00 14:00
Departure: preferred transport time	Friday 01 July				
	10:00	11:15		14:00	

TOTAL AMOUNT OWING: R

DIETARY REQUIREMENTS (please mark with an X)

None	Vegetarian	Halaal	Diabetic
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PAYMENT FORM

Please complete your Registration Form (page 15), your Payment Form (page 16) and, where necessary, your Membership Application/Renewal Form (page 17) and send them with proof of payment to the AMESA Congress Secretariat:

by e-mail to: congress2016@amesa.org.za (*Preferred!* Remember to attach all the forms)

by fax to: 086 406 3591 (Only if you *must!*)

by post to: The Congress Secretary
Nombulelo Mandindi
AMESA
P.O. Box 54
2050 WITS

PAYMENT METHOD (please tick one)

Internet payment or bank transfer:

Banking details of Congress 2016

Account Name: AMESA
Name of Bank: ABSA
Branch Code: 632005
Branch Name: Wynberg
Account Number: 9271293382
Type of Account: Cheque Account

Clearly enter your name and/or membership number in the reference section
The onus is on you to ensure that we receive the relevant information

Cheque or postal order made out to AMESA

Credit card:

Please debit my **credit card** account (Visa and MasterCard only) with R _____

Card number:

CVV Number: (*last three numbers on the back of your credit card*)

Tick your method of payment: Straight: Budget: 6 months 12 months

Name on card: _____ Expiry date: _____

Signature: _____ Date: _____

Note:

Your registration is not complete until we receive your full payment, and your AMESA membership is paid

AMESA MEMBERSHIP APPLICATION/RENEWAL FORM

If you are not a current paid-up AMESA member, you need to complete this section.

Please complete in full and in capital letters

1. **Membership no** (if renewal): _____
2. **Province:** _____ **Branch:** _____ (if known)
3. **Membership type:** Individual Institutional Associate (e.g. full-time student)
4. **Field of interest:** Primary Secondary Tertiary

5. *For Individual and Associate members only:*

Surname: _____ **First name:** _____ **Title:** _____

Postal address: _____ **Postal code:** _____

Tel. no: _____ **Fax:** _____ **E-mail:** _____

Name of institution: _____

6. *For Institutional members only:*

Designation of person to whom correspondence should be addressed

(e.g. The HOD Mathematics / Librarian): _____

Name of institution: _____

Postal address: _____

_____ **Postal code:** _____

Tel. no: _____ **Fax:** _____ **E-mail:** _____

7. *For student (associate) members only:*

I hereby declare that I am a full-time, pre-service student at the following tertiary institution:

_____ **Signature:** _____

Please include proof of registration at tertiary institution with your application.

8. **Membership subscription fee:**

Mark one, and then include the amount in the membership section and total

- South Africa, **Individual: R130**
- South Africa, **Institutional: R360**
- South Africa, Associate (**Full-time pre-service student at a tertiary institution**): **R40**
- South Africa, **Life membership: R3250**
- Other African countries**, Individual: **ZAR 170**
- Non-African countries**, Individual: **USD \$70**