



***Nematological Society of Southern Africa***  
***Nematologiese Vereniging van Suidelike Afrika***

**Application for membership/Aansoek om lidmaatskap**

Date \_\_\_\_\_

Name \_\_\_\_\_

Surname \_\_\_\_\_

Title \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postal code \_\_\_\_\_

Phone (work) \_\_\_\_\_

Cell no \_\_\_\_\_

E-mail \_\_\_\_\_

**Membership fees amount to R2 000.00 for 2 years.**

You can deposit the amount directly into the following account:

NSSA

Account no: 134812336

Standard Bank, Potchefstroom

Branch code: 05-28-38-43

**Please email proof of payment to SteenkampS @arc.agric.za**