



# ASTRONOMICAL SOCIETY OF SOUTHERN AFRICA

## COUNTRY MEMBERSHIP

NEW APPLICATION or RENEWAL

FORM TYPE:                      New Application                       Renewal

SURNAME: ..... TITLE (Mr, Ms, Dr, etc.) .....

FIRST NAMES: .....

ADDRESS: .....

.....

..... POSTAL CODE: .....

POSTAL ADDRESS: ..... POSTAL CODE: .....

(If different from above)

TELEPHONE NUMBER: ..... CELL NUMBER: .....

E-MAIL ADDRESS: .....

SIGNATURE: ..... DATE: .....

*I hereby agree to abide by the provisions of the Constitution of the Astronomical Society of Southern Africa*

### SUBSCRIPTION FEES:

- Entrance Fee (New Application only: R 50.00 R .....
- Membership (Full year July – June: R 85.00 R .....
- Donation to ASSA (Optional): R .....

TOTAL OF FEES:

R

**PROOF OF PAYMENT:** Please send completed form, together with a **COPY** of the payment advice, via one of these channels:

- **Postal:** Membership Secretary, ASSA, PO Box 9, Observatory, 7935
- **E-mail:** membership@assa.saao.ac.za
- **Fax:** +27 21 447 3639

### BANKING DETAILS: EFT DEPOSIT:

**Account:** Astronomical Society of Southern Africa  
**Bank:** Standard Bank of SA Ltd  
**Branch:** Pinelands (Sort Code 03 63 09)  
**Account #:** 276 188 349

### CHEQUE PAYMENT:

**Payable to:** ASSA  
**Cheque Deposit:** Details as above.