

OHASA

Application for OHASA Membership for 2020



IFDH Member

Personal Details:

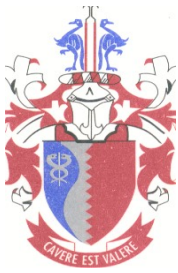
Title:	Surname:	First Name(s):
Preferred Name:		Maiden Name:
ID Number:		HPCSA No: OH/DA/DT/DP
Postal Address:		Physical Address:
Postal Code:		Postal Code:
Tel (Work):		OHASA Number:
Cell Phone:		Tel (Home):
Email Address:		Independent Practice <input type="checkbox"/> Supervised Practice <input type="checkbox"/>

Branch: Please mark all sections with X

Western Cape <input type="checkbox"/>	Eastern Cape <input type="checkbox"/>	Gauteng <input type="checkbox"/>	KwaZulu Natal <input type="checkbox"/>
Current Member <input type="checkbox"/>		New Member <input type="checkbox"/>	

Important notices:

- 1. ALL MEMBERSHIP FEES ARE DUE ON OR BEFORE 28TH FEBRUARY 2020.**
- 2. All current members who renew & pay their membership fees after this date will be charged an additional administration fee of R250.00.**
- 3. A 4-month interest free pay-off financial agreement is available (Nov 2019 - Feb 2020).
The form is attached.**
- 4. All membership categories have full access to the OHASA website www.ohasa.co.za (own personal profile. CPD activities, etc.)**



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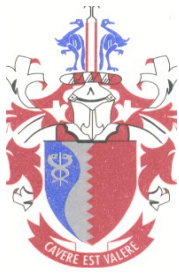
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OHASA MEMBERSHIP CATEGORIES:

Memberships	Mark with X	Membership Information
<p>CORE (Any Dental Professional) R 660,00</p>		<ul style="list-style-type: none"> • 4 CPD Questionnaires inserted in OHASA Journal (4 x 3 CEU's per Questionnaire = 12 CEU's) • Discounted fee per full day seminar R350.00 incl VAT • Core Members will not have voting rights
<p>FULL MEMBERSHIP (Oral Hygienist only) R 880,00</p>		<ul style="list-style-type: none"> • 2 Full-day subsidized CPD OHASA Seminars (2 x 6 CEU's = 12 CEU's) • 4 CPD Questionnaires inserted in OHASA Journal (4 x 3 CEU's per Questionnaire = 12 CEU's) • 3rd full Day seminar at a discounted fee of R350.00 incl VAT • Full Membership Oral Hygienists' have voting rights
<p>ASSOCIATE (If you are a qualified Oral Hygienist but not registered with the HPCSA) R 880,00</p>		<ul style="list-style-type: none"> • 2 Full-day subsidized CPD OHASA Seminars (2 x 6 CEU's = 12 CEU's) • 4 CPD Questionnaires inserted in OHASA Journal (4 x 3 CEU's per Questionnaire = 12 CEU's) • 3rd full day seminar discounted fee of R350.00 incl VAT • No voting rights
<p>ALLIED Dental Assistant R1441,00 Dental Therapist R1771,00 Dentist R2255,00</p>		<ul style="list-style-type: none"> • 2 Full-day subsidized CPD OHASA Seminars (2 x 6 CEU's = 12 CEU's) • 4 CPD Questionnaires inserted in OHASA Journal (4 x 3 CEU's per Questionnaire = 12 CEU's) • 3rd full day seminar discounted fee of R350.00 incl VAT • No voting rights



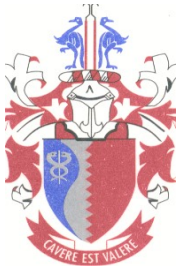
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<p>HONORARY (No Membership Fee applicable)</p>		<ul style="list-style-type: none"> • 2 Full-day subsidized CPD OHASA Seminars (2 x 6 CEU's = 12CEU's) • 4 CPD Questionnaires inserted in OHASA Journal (4 x 3 CEU's per Questionnaire = 12 CEU's) • 3rd full day seminar discounted fee of R350.00 incl VAT • Honorary Members have voting rights 									
<p>RETIRED (No Membership Fee applicable)</p>		<ul style="list-style-type: none"> • 4 CPD Questionnaires inserted in OHASA Journal (4 x 3 CEU's per Questionnaire = 12 CEU's) • R350.00 per full day OHASA seminar • No voting rights 									
<p>STUDENT (No Membership Fee applicable)</p>		<ul style="list-style-type: none"> • 4 CPD Questionnaires inserted in OHASA Journal (4 x 3 CEU's per Questionnaire = 12 CEU's) • R350.00 per full day OHASA Seminar • No voting rights 									
<p>DONAR (No Membership Fee applicable)</p>		<ul style="list-style-type: none"> • Per agreement • No voting rights 									
<p>INTERNATIONAL DENTISTRY SA JOURNALS</p> <table border="1"> <tbody> <tr> <td data-bbox="87 1549 1101 1591">1. Annual subscription - 6x journals</td> <td data-bbox="1110 1549 1256 1591">R 345.00</td> <td data-bbox="1372 1476 1580 1549" rowspan="4"> <p>Mark with x</p> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </td> </tr> <tr> <td data-bbox="87 1598 1101 1640">2. Online subscription option (Journal & 6 CDP Questionnaires)</td> <td data-bbox="1110 1598 1256 1640">R1035.00</td> </tr> <tr> <td data-bbox="87 1646 1101 1688">3. 10% discount if paid in full before 28/02/2020</td> <td data-bbox="1110 1646 1256 1688">R 931.50</td> </tr> <tr> <td data-bbox="87 1694 1101 1736">4. For CPD ONLY, (Read journal online)</td> <td data-bbox="1110 1694 1256 1736">R 690,00</td> </tr> </tbody> </table>			1. Annual subscription - 6x journals	R 345.00	<p>Mark with x</p> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	2. Online subscription option (Journal & 6 CDP Questionnaires)	R1035.00	3. 10% discount if paid in full before 28/02/2020	R 931.50	4. For CPD ONLY, (Read journal online)	R 690,00
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I understand that OHASA prefers to communicate with its members and applicants via email and SMS. OHASA does not communicate with applicants via postal service. It is therefore important that I immediately notify OHASA of any change in details i.e. email address or cellular contact number.

In order to provide you with the best possible service OHASA would like to inform you of other products, training and services within the profession.

May we send you this information via e-mail and sms? **YES** **NO**

Signature:	Date:
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Please complete this application form and email it with a copy of your payment and/or financial agreement to:

Email: ohasatreasurer@gmail.com

**Postal Address: OHASA Secretariat
P.O. Box 830
Newlands, Pretoria
0049**

BANKING DETAILS:

**OHASA National
ABSA Current Account
Account Number: 2870164818
Branch Code: 632005
Reference: HPCSA number, Surname**

For office use only

Western Cape <input type="checkbox"/>	Eastern Cape <input type="checkbox"/>	Gauteng <input type="checkbox"/>	KwaZulu Natal <input type="checkbox"/>
HPCSA #	OHASA Membership #	Processing Date	