

PCMA

Pharmaceutical Care Management Association of South Africa
Company Registration Number 97/17503/08

P.O. Box 652966, Benmore, 2010
Tel/Fax: (011) 794 5677
adie.bryson@pcma.org.za

Application for Membership

To the secretary, PCMA: I hereby apply to join the PCMA/ renew my membership and agree to abide by its Code of Conduct and pay all dues promptly.

My application is for:

Individual Membership 2012

- Individual Managed Care Pharmacist
- Individual related Healthcare Professional i.e. other than Managed Care Pharmacist

Annual membership = R1,800

- Academic
- Student
- Other (please state)

Annual membership = R500; can be paid R250 x 2

Individual Member Details

Full name _____

Professional qualifications _____

Company where employed _____

Position _____

Tel : _____ cell phone: _____

e-mail _____

Postal Address _____

_____ Code _____

Date: _____

Banking Details

PCMA

Standard Bank Cheque Account

Braamfontein Branch No. 4805

Account No. 201472392