

**SAACB** CORPORATE MEMBERSHIP  
APPLICATION FORM



Enquiries: [saacb1@gmail.com](mailto:saacb1@gmail.com) Website: <http://www.saclinpath.co.za/>

**The South African Association for Clinical Biochemistry**

COMPANY: .....

REPRESENTATIVES:  
NAME:

Name	Cellphone number	Telephone number	Email

WORK ADDRESS:.....  
.....  
.....

PREFERRED POSTAL ADDRESS (if different from above).....  
.....  
.....

SIGNATURE.....DATE.....

**Corporate fee: R2000 annual subscription**

- Cheques:** Cheques should be made payable to the SAACB and mailed to the Treasurer of the association. Please send a copy of the form to the Secretary at [saacb1@gmail.com](mailto:saacb1@gmail.com).
- Electronic transfer:** Transfer should be made in favour of SAACB. ABSA Bank Notice Deposit account no: 922 572 3864
- Postal order:** In favour of the SAACB *Please note: To avoid errors, all payments should bear the name and address of the applicant, and a photocopy of the bank transfer statement or deposit slip should accompany your application form.*

*President: Prof. R.T. Erasmus; Secretary: Prof. T.S. Pillay; Treasurer: Dr A.Zemlin.*  
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