

Toxicology Society of SA

TOXSA

APPLICATION FOR MEMBERSHIP

I hereby apply for membership of the Toxicology Society of South Africa (TOXSA), and undertake to abide by the terms and conditions of its Constitution

Circle or underline the appropriate category of membership:

Full member _____ *Bona fide student* _____ Corporate Member _____

Surname (Prof, Dr, M...):.....

First names:.....

Institutional affiliation:.....

Position:.....

Postal Address:.....

Telephone number:.....

Cellular phone:.....

Email address:.....

Details of tertiary qualifications:.....

Major field of interest in toxicology:.....

Signature of applicant: Date:

Signature of proposer: [*Can be the Head of Laboratory*]

Name of proposer [please print]:.....

Approved TOXSA Membership Committee [*Official use only*]

*This Application Form should be completed and returned to the **Secretary** with the Annual Subscription Fee (**R150** for Ordinary Members, **R80** for Students – proof of registration required, and **R1 500** for Corporate Membership). **Cheques** to be payable to the **Toxicology Society of South Africa***

*Alternatively, deposit into **Toxicology Society of South Africa** current account at **FNB Parktown (code 25-04-55)** and account number **620-3223-6516** and then fax application AND deposit slip (or email a scanned copy) to **Secretary: Japie van Tonder***

Email: **japie.vantonder@up.ac.za**
Tel: 012 319 2663
Fax: 012 319 2411
Postal address: Department of Pharmacology,
Faculty of Health Sciences,
University of Pretoria, Private bag X323, Pretoria, 0001.