



South African Institute of Physics

NPO Registration Number: 130-172 NPO

SAQA Professional Body ID: 777

<http://www.saip.org.za/>

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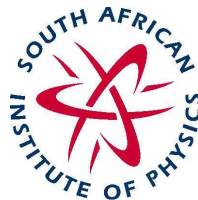
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E-Member Application Form

Title						
Surname						
First Name						
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Email						
Cell phone						
Institution / School / University						
Category (Tick the appropriate box)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Primary / High School		Undergraduate		Teachers/Educators	
Specify Qualifications	Grade in School:		Year of Study:		Qualification:	
					Subjects Taught:	
Applicant	Signature:			Date:		
HOD /Supervisor Approval (University undergraduates only)	Signature:			Date:		
Parent / Guardian Approval (School learners under 18 yrs)	Signature:			Date:		

Physical Address

Building 42a, CSIR South Gate Entrance, Meiring Naude Road, Brummeria, PRETORIA, 0001, South Africa



CONSENT FORM:

Provided in terms of the PROTECTION OF PERSONAL INFORMATION ACT 4 OF 2013 (POPIA)

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SAIP mission is “To be the Voice of Physics in South Africa”

SAIP’S GOALS: SAIP’s goals include; To promote study and research in physics and related subjects and to encourage applications thereof; To further the exchange of knowledge among physicists by means of publications and conferences; To uphold the status of and ensure a high standard of professional conduct among physicists; Giving awards for excellence at various levels; Promoting efforts to increase the number of students in Physics, and Contributing to and assist in shaping science policies in South Africa.

I, the undersigned, hereby:

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2. Acknowledge and understand that, in reviewing my request for participation or offering the activities and services to me, SAIP will collect and process my personal information, including my full names, identity number, financial information, contact numbers, physical and postal addresses; pictures;
3. Acknowledge and understand that SAIP may in reviewing my request for participation or offering the activities and services collect my special personal information, including biometric information;
4. Grant consent to SAIP:
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 - b. Retain my personal information for purposes of implementing SAIP’s public benefit activities services and historical, statistical or research purposes;
 - c. Give effect to the processing of my personal information pursuant to an agreement between myself and SAIP;
 - d. Further process my personal information in manner that is compatible with the purpose for its collection, including: audit reports, donor reports, combat money laundering, the referral to appropriate collaborating, subsidiary organisations and service providers that can render related services; and
 - e. To communicate with me in future for purposes of ongoing communication, direct marketing, as defined, or fundraising and to publish my picture and other non-sensitive personal information in SAIP’s annual report, donor reports, brochures and website.
 - f. Consent to receive information from SAIP for example newsletters, press releases, job announcements, events announcements among other relevant information related to physics
5. Confirm that to the extent that I have provided SAIP with the personal information of other persons, including family or friends, I have obtained their consent to furnish such personal information.
6. Acknowledge that I have been made aware of where I can access a copy of SAIP’s Privacy Policy and Promotion of Access to Information manual available at <https://www.saip.org.za/paia-popia/>

Signed on thisday of

FULL NAMES: