



Student Membership Form

Please complete and return to: admin@omasa.org.za

Title:	
Name (s)	
Surname	
ID/Passport Number	
Postal Address	
Email Address	
Cell phone number	
Other Qualifications	
Name of Institution at which you are studying	
Year of study	
Date:	Signature:

OMASA is required to comply with the POPI Act. By completing this form you confirm that you are happy to receive OMASA correspondence by email, by contact number or other means, and that information held by OMASA may be used to achieve its stated objectives. Should you no longer wish to be a member of OMASA and would like to be removed from our mailing and contact list, kindly write an email stating this to: admin@omasa.org.za

Bank Details: First National Bank
Orientation & Mobility Association
Branch Code - 250655
Account Number: 62900216806
Reference: Please write your name as
reference

*If possible, please pay by EFT
(electronic fund transfer) and not a
cash deposit, which incurs bank
charges to OMASA.*

OMASA is not registered for VAT.

Types of Membership & Fees:

Professional: R300
Associate: R150
Student: R50
Organisational: R600