



98 – 11th Street, Parkmore, Johannesburg - 2196

www.pcasa.org.za

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APPLICATION FOR PCASA MEMBERSHIP

I enclose payment as: EFT Bank Deposit Debit Order < Please mark with X

Student Member - R1200.00 Full Membership - R2400.00 PCASA Badge - R60.00 Supplier Member Training Member

• Fax or email confirmation of your payment along with this form • Please note all payments to be made to PCASA

ADDRESS:
PCASA
c/o Livingstone Crichton
98 – 11th Street
Parkmore, 2196
Fax: 086 665 8480
info@pcasa.org

BANKING DETAILS
Account Name: PCASA
Bank: FNB Sandton City
Account No.: 62365160820
Branch Code: 25060500

PERSONAL DETAILS:

Name: I.D. Number:

Postal Address:

Code:

Tel: (Work) Tel: (Home)

Email Address: Mobile:

EMPLOYMENT DETAILS:

Occupation:

Name & Address of Place of Employment:

Website:

EXPERIENCE DETAILS:

Training institution/s:

How long have you been doing Permanent makeup?

Machines/devices used (please indicate with an X) -> Coil: Rotary Pen: Digital Rotary: Manual Tool:

Do you wish to be listed on the PCASA website? Yes No <- (please indicate with an X)

How did you hear about PCASA?

Declaration: I wish to apply for membership and do solemnly declare that if elected a member, I will observe all conditions of membership, By-laws, Ethical rules and Regulations and will conduct myself honorably in the practices of my profession and maintain the dignity and welfare of PCASA at all times.

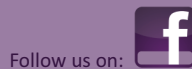
Digital Signature of Applicant:

Date: (DD/MM/YYYY)

FOR OFFICE USE ONLY:

MEMBERSHIP NUMBER: DATE:

MEMBERSHIP CARD/BADGE POSTED: DATE:



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