



## **Membership Application 2018**

## Documents needed for application for new membership:

- 1. Fully completed personal application form.
- 2. Proof of Aesthetic and Anti-aging trainings attended locally or internationally (certificates)
- 3. Abbreviated CV, HPCSA registration certificate, Practice History, Aesthetic & Anti-Aging experience Membership (Full or Candidate) will be granted after evaluation of the documents by the executive committee. The committee could ask for more details after evaluation of documents.

  Membership fee should only be paid after approval of application by the committee (Invoice will be issued).

Personal detail	s:						
Surname							
First Name							
Title				MP Number			
ID Number				HPCSA Number			
Mobile number							
PO Box					Post	tal Code	
Practice Address  1.				Practice Address 2.			
Telephone				Telephone			
Fax				Fax			
Email Address							
Qualifications							
Special Practice or Procedure Interest(s)							
Please indicate the procedures that you perform:	U	Average amount of the procedures per month	pre	ease indicate the ocedures that you erform:			amount of the ures per month
Botulinum Toxin injections			Sc	lerotherapy			
Dermal fillers			Ski	in rejuvenation			
Chemical Peels				nti-aging consultatio	ns		
Laser and light base treatments	ed			esthetic surgery ocedures			
Mesotherapy Slimming/ Weight Io	oss		Ot	her (specify)			

Training History B:	CPD points		
CPD Accredited Education			
1.			
2.			
3.			
4.			
5.			
6			
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Any Malpractice/ HPCSA cases against rou?			
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	2. 3. 4. 5. CPD Accredited Education 1.  2.  Yes or No.		

## Membership 2018: February 2018 – February 2019

**ABSA Bank** 

Special interest

Name: Aesthetics and Anti-Aging Medicine Society of South Africa

Acc. Number: 4083544403

Branch: Brooklyn Branch Code: 635010 Annual Fee 2018: R 1 400

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