

MEMBERSHIP APPLICATION FORM

Incomplete forms will NOT be processed as ALL fields are required. Membership Application can be completed online at www.iodsa.co.za

I hereby apply for membership of the Institute of Directors in Southern Africa (IoDSA). I subscribe to the IoDSA's member Code of Conduct as reflected on this form. I undertake to settle subscriptions and other dues on rendition of invoice before my application is accepted. I accept and acknowledge the Terms and Conditions and agree to abide by them.

Code of Conduct for Members of the IoDSA

As an individual charged with governance duties in an organisation(s), I commit:-

- To serve the best interest of the organisation with care, skill, diligence and courage.
- To be responsible for the actions and assets of the organisation and for keeping the organisation on its strategic path.
- To be accountable to stakeholders for decisions and actions of the organisation.
- To be fair to stakeholders of the organisation by considering the legitimate interests of those who are affected by the organisation.
- To be transparent by disclosing information that will enable stakeholders to hold the organisation to account and that provides a holistic representation of the organisation's past performance and its prospects for future value-creation.

As a member of the IoDSA, I commit:-

- To uphold the reputation of the IoDSA.
- To advance the IoDSA's objective of promoting sound governance and responsible directorship.

Signature.....

Date.....

Company Name.....

Personal Details (Compulsory)

Titles (Mr/Mrs/Ms/Other).....

Surname.....

First Names.....

Known as.....

Date of Birth..... Nationality.....

ID Number (Compulsory for Loyalty Card).....

Gender..... Race.....

Mobile Number.....

Email to receive IoDSA correspondence.....

Business Details (Compulsory)

Company Name.....

Type of Company

- (Pty)Ltd Public Ltd Gov Dept Parastatal
 CC Proprietor NGO Inc. Partnership

Postal Addresses:

Billing.....

..... Post Code.....

Correspondence (if different to billing address)

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..... Post Code.....

Province.....

Tel.....

Main activity of company.....

Number of Directors/Partners..... Number of Employees.....

Is the company paying subscription Yes No

If yes, company VAT no.....

Application process

Once application and payment is received, the process to administer an application is 10 days. Following this, communication will be sent to the applicant indicating whether or not he/she has been successful. Should an applicant not be successful a reimbursement will be made.

Contact Person for Board Membership Administration:

Name..... Surname.....

Tel.....

Email.....

General Details

Why did you join IoDSA?

- Networking Service Offerings Facilities
 Status Updates Other (please specify)

How did you hear about the IoDSA?

- Referral – Who? Publication – Which?
 Function – Which? Advert – Where?
 Other (please specify).....

What would you like to get out of your IoDSA membership?

- Business Growth Career Development
 Build Network Base Other (please specify)

What are your leisure interests?

- Sporting – What?.....
 Cultural – What?.....
 Other (please specify).....

Physical address to courier your membership pack during office hours only: Please note our courier cannot deliver to a postal address.

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Personal Business Details (Compulsory)

Academic, professional or business related qualifications

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Director Partner Proprietor

Company Executive Other.....

Job title in company.....

Main Responsibility.....

Number of years business experience.....

Number of years company director experience.....

Other companies of which I am a Director/Partner of

.....(Attach list if necessary)

Your Secretary/PA's contact details:

Name..... Surname.....

Tel.....

Email.....