

DURBAN ALUMNI ASSOCIATION SUBSCRIPTION FORM - 2022 DETAILS OF PRINCIPAL MEMBER

Surname:	First Name:		
Identity Number:		Date of Birth:	
Please cross (X)	the relevant bo	x below:	
Membership Type:	Uni	versity of KwaZulu-Natal GRADUATE Membe	ership
		AFFILIATED Membe	ership
Address:			<u> </u>
		Postal Code:	
Telephone: Home:		Work:	
Fax:		Cell:	
Email:			
C		DETAILS OF ADDITIONAL MEMBER	
		First Names:	
Please cross (X)		Date of Birth:	
		k Delow.	
Membership Type:	University of KwaZulu-Natal GRADUATE Membership		
	AFFILIATED Membership		
Address:			
		Postal Code:	
Telephone: Home: Work:		Work:	
Fax:		Cell:	
Email:			
ANNUAL SUBSCRIPTION		COST PER PERSON	TOTAL COST
Principal Member		R50. 00	
Additional Member		R50. 00	
TOTAL		I	R

Please complete the above form and return with payment: DIRECT DEPOSITS/EFT: to the University of KwaZulu-Natal, Standard Bank, Account No.: 053080998, Branch Code: 045426, Reference: Your Name & 8101 30063

Please Return to: Nomcebo Msweli, Alumni Relations Office, University of KwaZulu-Natal, Howard College Campus, Durban, 4041 Telephone: 031 260 2016, Email: mswelin@ukzn.ac.za