



MEMBERSHIP DATABASE AND FEE FORM FOR 2023

www.cycadsociety.org

email: cycad@cycadsociety.org

Please complete this form and return by email to update our database

Name:		Id number / Company number				
Title, initials and surname, and name by which person is known or name of institution in Capital letters			Membership number			
Postal address for delivery:						
Postal code		Province				
Email			Cell Phone Nr.			
I/We hereby apply for membership of the Cycad Society of South Africa and declare that I/we fully endorse the aims of the Society as listed below:						
<ol style="list-style-type: none"> To encourage the cultivation and propagation of cycads. To disseminate information on cycads by various means, inter alia through the regular publication of a magazine. To arrange the legal exchange of plants, seedlings, seed, and pollen of different cycad species between members. To encourage scientific research on cycads. To promote all aspects of cycad conservation. To foster and maintain links with organizations having similar aims on an international basis. 						
Member fees fro 2023 by category and delivery of Encephalartos						
RSA Members (resident in South Africa) Full Member		Postal Delivery	Electronic Version	Foreign members		
		R360.00	R250.00	Air mail delivery	Surface mail	Electronic Version
RSA Student Member (Primary, Secondary, Tertiary)		R250.00	R100.00	US\$ 65, AUS 67 Euro 49 GBP 44	US\$ 59, AUS 60 Euro 47 GBP 41	US\$ 50 AUS 51 Euro 42 GBP 40
Southern African members (SADC)	Air mail delivery	Surface mail	Electronic Version			
	R480.00	R450.00	R250.00			
Membership fees for 2023 chosen		By ticking YES, I/We hereby give permission to the Society to publish my/our contact and address details in the member list of the society to other members.				
Cycad Research Fund (Optional)						
General donation (Optional)						
TOTAL (Membership fee and other donations)		Signature				
BANK DETAILS: Standard Bank	Branch code 015945	Account number 11943300	Swift:	Reference: use you Membership number or Initials and Surname		
			SBZAJJ			
By ticking YES, I/We hereby give permission to the Society to publish my/our contact and address details in the member list of the society to other members.				YES	NO	
PLEASE SEND THIS COMPLETED FORM WITH YOUR PROOF OF PAYMENT TO cycad@cycadsociety.org TO UPDATE OUR DATABASE						