

Appendix 1

PSASA Application for Membership or Associate Status

This application must be accompanied by:

- 1) Applicant's signature on the PSASA Code of Ethics;
- 2) Membership category verification schedule and documents; **(Members only)**
- 3) Payment in full of initiation fee and
- 4) Confirmation of payment choice (semi-annual or annual membership payment)

Please type or print all information clearly and submit to the PSASA National Administrator at admin@psasouthernafrica.co.za

Your Personal Details

Title (Mr / Mrs / Ms / Dr / Prof)

First Names:

Surname:

Known As Name:

ID Number:

Your Speakers Profile

Your Speaking Disciplines
(Please tick all applicable)

Keynoter

Trainer

Facilitator

Coach

MC

Consultant

Entertainer

Mentor

Other Disciplines – Please state:

For how long have you been earning direct income as one of the above

No of Years:

Are you represented by any Speakers Agents/Bureaus

Yes

No

If so by how many?

If you are NOT earning regular income as any one of the above Please state your interest in joining the PSASA below: (eg – Aspiring Speaker, Toastmaster, Company speaker, Academic Lecturer etc.)

**Your Speaking Company or your
"Trading As" Name:**

Company Status:

i.e. Sole Prop; Pty Ltd , CC.

Company Reg. Number

VAT Registration Number

Your Contact Details

Street Address

and Postal Code

Postal Address

and Postal Code

Business Phone: incl. code):

Home Phone :(

Fax :(incl. code):

Cell:

E-Mail address:

Skype Name:

| | |
|--|--|
| Twitter Name: | |
| Speakers Website URL: | |
| YouTube Channel Name/URL: | |
| Slide-Share URL: | |
| Facebook URL: | |
| Linked In URL: | |
| Google + URL: | |
| Other: | |
| | |
| I was referred to the PSASA by: | |
| PSASA Member or Associate Name: | |
| Other: - (e.g. Non-Member, Web site search, Event manager, Magazine, Bureau etc.?) | |

| Application | | | | | |
|---|--|----------------------|--|----------------|--|
| I wish to apply for the following category of membership with the PSASA (please X where applicable) | | | | | |
| Member | | Associate | | | |
| Member Fees | | | Associate Fees | | |
| Initiation Fee: R450 | | | Initiation Fee: R450 | | |
| R 1,415.00 (semi-annual payment) or R 2,830.00 (annual payment) or | | | R 1,010.00 (semi-annual payment) or R 2,020.00 (annual payment) or | | |
| R 236 per month - by monthly debit order | | | R 169 per month - by monthly debit order | | |
| <i>All Fees are payable by the 7th monthly and can be amended by the Presidents Council from time to time.</i> | | | | | |
| <i>All fees are payable by EFT, Credit Card or Monthly PSASA Initiated Debit Orders only</i> | | | | | |
| <i>One months' notice in writing must be given to the PSASA administrator when resigning from the PSASA</i> | | | | | |
| <i>Please note that membership or association status is not transferable and fees are not refundable</i> | | | | | |
| Please Indicate how you will be paying your fees | | | | | |
| Annually | | Semi-Annually | | Monthly | If monthly – please complete and sign the debit order authority attached |
| Qualifying Criteria for Members: <i>Any individual shall be eligible for <u>Membership</u> in the PSASA Association who:</i> | | | Qualifying Criteria for Associates <i>Any individual shall be eligible as an <u>Associate</u> in the PSASA Association who:</i> | | |
| Such person must be a person who speaks, trains or coaches professionally and earns a major portion of his or her income from at least 25 fee-paid engagements per annum. | | | Such person must be a person who speaks, trains or coaches professionally but does not yet qualify for membership status under those criteria. | | |

| Or | Or |
|--|--|
| A member earns a minimum of R250, 000-00 or equivalent currency as speaking related income during the 12 months preceding the application or upgrade. | one who aspires to speak professionally, or a person who is involved in a business or other organisation that supports the speaking or training industries |
| Lives within the geographic boundaries of the Association | Lives within the geographic boundaries of the Association |
| Has a reputation of integrity and sound character; | Has a reputation of Integrity and sound character. |
| Has not been declared insolvent and has never been expelled from the PSASA or other similar organisation | Has not been declared insolvent and has never been expelled from the PSASA or other similar organisation |
| Agrees, upon acceptance of application for Membership, to abide by the by-laws, the Association's Code Ethics and such other rules or regulations as may be adopted from time to time; | Agrees, upon acceptance of application for Associate status, to abide by the by-laws, the Association's Code Ethics and such other rules or regulations as may be adopted from time to time; |
| Meets such other requirements as may be established by the Presidents Council and the council of the PSASA. | Meets such other requirements as may be established by the Presidents Council and the council of the PSASA. |
| Current and Paid-up Members may use the PSASA Associations logo on their material, web sites etc. | Associates <u>may not</u> use the PSASA Association's logo under any circumstances |
| Members are encouraged to use their Membership Status wherever possible and promote the PSASA where appropriate. | Associates <u>may not</u> represent that they are 'Members' of the PSASA |
| Members <u>may</u> vote on any issue which may result in a change to the Constitution of the PSASA | Associates <u>may not</u> vote on any issue which may result in a change to the Constitution of the PSASA |
| Members may also vote on any other issue at any meeting of the PSASA | Associates may vote on any other issue at any meeting of the PSASA |
| <i>Note: all persons accepted for Members Status will be expected to downgrade to Associate Status as soon as they no longer qualify in terms of the Member Status requirements.</i> | <i>Note: all persons accepted for Association Status will be expected to upgrade to Member Status as soon as they qualify in terms of the Member Status requirements.</i> |
| Membership fee for Members includes the monthly subscription to the <i>Speaker</i> magazine, and <i>Voices of Experience</i> CD, published by NSA (USA). | Associate fee for Associates includes the monthly subscription to a link to download <i>the Speaker</i> magazine, and <i>Voices of Experience</i> CD, published by NSA (USA). |
| Members of the PSASA automatically confers membership status of the GSF (Global Speakers Federation) | Associates are not eligible for membership of the GSF (Global Speakers Federation) |
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|---|------------------|----------------|
| The application is to be proposed and seconded by two members in good standing of the PSASA; | | |
| | | |
| 1. Sponsor Name. | Member of | Chapter |
| | | |
| 2. Sponsor Name | Member of | Chapter |
| | | |
| <i>I confirm that all the details provided above are true and correct</i> | | |
| | | |
| Applicants Signature | Date | |
| | | |
| In support of my application I submit the following documentation: | | |
| 1 – Signed Copy of the PSASA Code of Ethics (Appendix 2) (Members and Associates) | | |
| 2 - Schedule of Speeches (Annexure 3) (Members only) | | |
| 3 – Letter/Statement from my Auditors – Confirming Income (Members only) | | |
| 4 - Letter from my Employers (Annexure 4) – (Members only) | | |
| | | |
| Please note that applicant may submit Annexure 3 only, should they not wish to include a letter/statement from their auditor. The applicant may also submit a letter/statement from their auditor only, if applicable. | | |