



APPLICATION FOR MEMBERSHIP

Institute of Municipal Engineering of Southern Africa

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 Website: www.imesa.org.za

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 WESTVILLE
 3630
 South Africa

IMESA House
 2 Derby Place
 Westville
 3629

Title	Initials	First Name	Surname

ID number:	Birth Date:	Citizenship:

Gender [#] :	Population Group [#] :	Disability [#] :

Telephone number:	Fax number:	Mobile number:

E-mail address:

Postal address (line 1):

Postal address (line 2):

Town/City:

Postal code:

*** Referred to IMESA by
(name and contact details):

Engineering and technical education and qualifications e.g. Government Certificate of Competency and/or further studies:

Highest qualification:

Institution:

Date obtained:

Present course of study:

Expected qualification:

Institution:

Date commenced:

Member of other institution
or society with member no.:

Voluntary information

*** Referees are entitled to a R130 referral fee

Professional and/or in-training registration at Engineering Council of South Africa (ECSA) or an equivalent engineering council recognized by ECSA (original certified copies of all certificates and registrations must be attached):

Engineering Council:

Category of Professional Registration:	Professional Registration No:	Date of Professional Registration:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Technical Experience:

Present position:

Organisation:

Date appointed:

Major responsibilities:

Previous position:

Organisation:

Date appointed:

Major responsibilities:

Indicate preferred categories of technical interests. Indicate as 1, 2 or 0 (1 = high interest, 2 = casual interest, 0 = no interest):

Infrastructure Asset Management (A)	Building Structures & Town Planning (B)	Computer Applications & Knowledge Management (C)	Projects & Business Management (P)	Roads, Transportation & Stormwater (R)	Water, Sanitation & Environment (W)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Membership Type and Category applied for (see Constitutional requirement below):

PROFESSIONAL ASSOCIATE GRADUATE STUDENT
<input type="text"/>

I do hereby accept that, in the event of my election, I will subject myself to the Constitution, and the relevant By-laws, as well as to any future amendments or extensions thereto; I will pay the membership fees as required; I will promote the objects of the Institution as far as may be in my power and I certify that all the particulars given on this form are true and correct.

Signed on this day of 20.....

Signature: