

# OTASA MEMBERSHIP APPLICATION FORM - 2018

(Inclusive of SAISI, INSTOPP, WFOT, OTARG, and MPS)

Tel: 0123625457 / Fax: 0866515438 / Email: [otoffice@uitweb.co.za](mailto:otoffice@uitweb.co.za)



## WHY JOIN OTASA?

- ❖ All “full” members have equal privileges and benefits; student members have the rights and privileges of full members excepting they do not have voting powers
- ❖ OTASA is recognised as the official voice for OT in South Africa
- ❖ OTASA offers continuing professional development for occupational therapy staff – with reduced rates for members on all OTASA courses, workshops & congresses
- ❖ Branch network – OTASA has branches throughout South Africa, which will give you the opportunity to meet other OT Staff in your area and share ideas and experiences
- ❖ A national OTASA Congress is held every two years – the key scientific gathering of the profession, and is attended by international as well as local presenters
- ❖ All members have access to the online version of the SA Journal of Occupational Therapy (3 issues per annum)
- ❖ All OTASA members can obtain advice on any OT issue either by contacting the OT Office (which is open daily) or their branch – you will either receive the relevant information or be directed to the right person
- ❖ Information on issues of importance to the profession (e.g. legislative changes) is disseminated by OTASA

**All of the above information will be circulated via email / sms or post**

## WHY JOIN INSTOPP?

- ❖ Be **visible** – subscribe to the Directory for OTs in Private Practice, free of charge
- ❖ Be **informed** – receive 6 - 9 CPD points per annum
- ❖ Be **professional** – INSTOPP aims to continuously re-evaluate and promote best practice
- ❖ Have your **needs met** – INSTOPP strives to identify and pursue the needs of the Occupational Therapist in private practice
- ❖ **Manage** your private practice – INSTOPP annually presents Practice Management Courses
- ❖ **Develop** yourself **professionally continuously** – INSTOPP presents courses to assist you with your professional development. If you are an INSTOPP member, you receive a reduced rate
- ❖ Have **representation** – INSTOPP has representation on Standing Committees of OTASA, such as Coding, Ethics, CPD etc., on matters regarding Private Practice

## WHY JOIN MPS?

- ❖ MPS offers support to members with the legal and ethical problems that might arise from their professional practice
- ❖ Members have access to expert advice from local medico-legal advisors and where appropriate, legal assistance and compensation for patients who have been harmed through negligent treatment
- ❖ Note that this is a group cover - MPS Membership Guidelines can be obtained from the OT Office
- ❖ Also available to OT Students 1<sup>st</sup> to 4<sup>th</sup> year

**Please note that an additional registration form needs to be completed when applying for MPS membership – request from [otoffice@uitweb.co.za](mailto:otoffice@uitweb.co.za)**

## WHY JOIN SAISI?

- ❖ *CPD questionnaire: articles published on website every second month with CPD questionnaire. You can earn up to 6 Ceu's extra for free per annum*
- ❖ *Regular book reviews available*
- ❖ *New up-to date information regarding Ayres Sensory Integration*
- ❖ *Exciting up-to date activity ideas in 'Publications & CPD'*
- ❖ *Paid-up SAISI SIPT qualified Therapist names are published on the SAISI website for reference purpose etc.*
- ❖ *Constant updates on SIPT issues (from 2018 updates will also be provided on the new Evaluation of Ayres Sensory Integration (EASI) will also be provided)*
- ❖ *SAISI members receive a reduced fee when applying for SAISI workshop*
- ❖ *Information regarding workshops and courses are published on the SAISI website*
- ❖ *Interesting articles of benefit regarding Ayres' Sensory Integration*
- ❖ *Be updated regularly on international matters regarding ASI and have the opportunity to be exposed to international experts whom SAISI invite to present workshops and lecture here in SA*
- ❖ *Connect to the SAISI Face Book page*
- ❖ *Attend SAISI Journal Group/s for free (obtain 18 Ceu's per annum)*
- ❖ *Support/mentoring available through SAISI*

**You can join any time during the year, contact the OT Office to confirm costs after 1 July**

## MEMBERSHIP AND PAYMENT DETAILS

- The membership year runs from 1 January – 31 December
- All new members pay a registration fee on joining OTASA for the first time (the registration fee is for administration purposes)
  - Please note that a re-registration fee is payable should your membership expire without renewal
- **Only OTASA members are eligible to serve as office bearers**
- It is not intended that the membership fee structure should exclude anyone who genuinely wishes to be a member of OTASA. Should any member not be able to pay the full fee, an application in writing can be made for a reduction in fees via email to [otoffice@uitweb.co.za](mailto:otoffice@uitweb.co.za). **(to qualify for the sliding scale you have to apply ANNUALLY)**
- Should you receive an annual income of R281 000.00 or less you will only be liable for **70%** of the full OTASA membership fee
- Non-practicing members (Non-earners, Pensioners & Maternity) – **50%** of the OTASA membership fee Your application for a reduction must be fully motivated and include a current payslip or other evidence of income level, directed to the OT Office.
- Membership fees for existing members must be **paid by 31 March** (if fees are not fully paid up by 31 March your membership will be terminated immediately) ○ **No other membership fees (i.e. MPS, SAISI, WFOT, INSTOPP) will be accepted if OTASA fees are not paid in full**
- Membership to the Medical Protection Society is only available to paid up OTASA members in good standing (MPS fees are NOT determined by OTASA) ○ **MPS fees cannot be paid in instalments**
- When fees are deposited directly into the OTASA bank account or electronically transferred, a deposit slip or proof of electronic transfer must be faxed to the OT Office at **0866 515 438**, or email to [otoffice@uitweb.co.za](mailto:otoffice@uitweb.co.za)
- **All cheques / postal orders must be made payable to OTASA**
- Should you wish to terminate your membership with any of the above PLEASE note that you need to do so in writing. You can fax your termination to 0866 515 438 or email to [otoffice@uitweb.co.za](mailto:otoffice@uitweb.co.za) or post to PO Box 11695, Hatfield, 0028

### About your personal information:

- OTASA may use the information you provide to us, for our own internal purposes, e.g. to evaluate membership size and profile nationally or per sector or region.
- OTASA may also use collated, anonymised data to serve the interest of the profession, e.g. to interact with government, statutory bodies (HPCSA), medical schemes and others, within the mandate of OTASA. No individual or identifiable data will ever be used within these contexts. Data that may be shared in this manner include aggregated numbers on areas of practice, demographic data (ethnicity, disability and gender profile of the membership), geographic data (e.g. numbers of OTs per province), numbers of members in private sector, etc.
- Directory for OTs in private practice: information in this directory is circulated to the public for referral purposes (your name only appears in this Directory if you fill in the form below) ○ Should you wish to remove your name from the Directory please do so in writing to [otoffice@uitweb.co.za](mailto:otoffice@uitweb.co.za)
- OTASA does not sell or share any of your personal information with any party. OTASA has an email & sms system in which to inform members of courses presented by other professions, goods for sale, vacancies etc. You as an individual then “reply” directly to the advertiser and in that way the “third party” obtains your details, *they then become responsible for your personal data and any concerns or queries you have, will have to be addressed with them, and not OTASA*
- As mentioned above we would like to keep our members “informed” and would like to send you relevant and up to date information on different levels – PLEASE indicate below your consent to this distribution process of ours
  - YES**, I want to receive promotional materials from companies who work in the OT field. (This would include vacancies, information on conferences, events and CPD relevant to the health sector hosted and or promoted by third parties)
  - NO** I do not want to receive promotional materials from companies who work in the OT field. (This would include vacancies, information on conferences, events and CPD relevant to the health sector hosted and or promoted by third parties)

### **Special Interest Groups**

Should you be interested in joining a special interest group e.g. SASHT, POTS, OTLA, Medico Legal etc., please request the contact information from the OT Office

### **OTASA BANKING DETAILS**

**Bank-** Standard Bank, **Name of account** - OTASA,  
**Branch** – Hatfield, **Branch Code** – 011 545, **Account Number** – 012 598 216

PERSONAL DETAILS						
<b>IDENTITY NUMBER:</b>					HPCSA Registration Number	
Surname						
Name(s)						
Initials & Title						
Maiden Name						
Ethnicity & Gender (requested for statistical purposes)		Ethnicity			Gender	
Kindly indicate if you are a member with a disability		YES			NO	
What type of reasonable accommodation do you require to attend meetings or workshops?						
Mailing Address, e.g. Post box (please complete both addresses or indicate if there is no work address)						
City		Postal Code			Province	
<b>Physical</b> Work/Practice Address						
Suburb and/or city/town		Postal Code			Province	
Indicate with a cross the Branch that falls in your area		<b>E Cape</b>	<b>S Cape</b>	<b>W Cape</b>	<b>N Cape Free State</b>	<b>North West</b>
		<b>KZN</b>	<b>Limpopo</b>	Mpumalanga	<b>S Gauteng</b>	<b>N Gauteng</b>
PRACTICE CATEGORY						
Private Practice	Private Hospital	Private Clinic	Government	School	NGO	Other
CONTACT DETAILS						
Tel (W)			Fax (W)			
Cell			Tel (H)			
E-mail						
QUALIFICATION						
What qualification have you obtained?						
In which year was the qualification obtained?			Where was the qualification obtained?			
Name any postgraduate qualifications obtained and year in which obtained						

FIELDS OF PRACTICE						
Neurology Adult	Neurology Paediatric	Physical Adult	Physical Paediatric	Psychiatric Adult	Psychiatric Paediatric	Developmental Delay
Early Intervention	Burns	Cardiology	Consultancy	Domiciliary / Community	Community	Geriatrics
Groups	Hands	Hearing Impaired	Head Injuries	Medico-Legal	Primary Health Care	Vocational Rehabilitation
Orthopaedic	Other :					
Membership fee structure for 2018 OTASA Membership Compulsory						
All OTASA membership fees are inclusive of WFOT membership as from 1 January 2016				Amount		
Registration & Re-registration fee				R100.00		<input type="checkbox"/>
Full OTASA Membership				R1 294.00		<input type="checkbox"/>
OTT / OTA 2/3 of full fee (OT Technicians / OT Assistants)				R496.00		<input type="checkbox"/>
70% OTASA Membership Should you receive an annual Income of R281 000.00 or less you will only be liable for <b>70%</b> of the full OTASA membership fee				R906.00		<input type="checkbox"/>
Non-practicing OTASA Membership (Non-earners, Pensioners & Maternity)				R648.00		<input type="checkbox"/>
Student Membership (1-4 <sup>th</sup> year students) PLEASE INDICATE CURRENT YEAR OF STUDIES _____				R152.00		<input type="checkbox"/>
SAISI				R575.00		<input type="checkbox"/>
INSTOPP				R570.00		<input type="checkbox"/>
OTARG				R184.00		<input type="checkbox"/>
<b>Medical Protection Society</b> – (Also available to OT Students 1 <sup>st</sup> to 4 <sup>th</sup> year. Please note that an additional application form needs to be completed when applying for MPS membership)				R1 320.00		<input type="checkbox"/>
Honorary OTASA Category A				R324.00		<input type="checkbox"/>
Honorary OTASA Category B				R648.00		<input type="checkbox"/>
Honorary OTASA Category C				R971.00		
<b>Affiliate OTASA Membership – National</b> (no voting power) (No voting power) e.g. speech and Physio therapists that attend the SAISI workshops & courses <b>Does not include membership to WFOT</b>				R777.00		<input type="checkbox"/>
<b>Associated OTASA Membership – International</b> (No voting power) e.g. OTs living in other countries of national OT associations in other countries who want to be informed about OT in South Africa <b>Does not include membership to WFOT</b>				R1037.00		<input type="checkbox"/>
<b>TOTAL</b>				<b>R</b>		
Do you belong to a union			If yes, which one			
YES	NO					

**As a member I agree and acknowledge**

- To make myself acquainted with, and to abide by the rules and regulations of the Association as laid down in the Constitution
- If my current membership fees are not paid up by 31 March, I shall not be able to utilise any of the advantages and services supplied by the Association

Signature of applicant

Date

# DIRECTORY FOR OTs IN PRIVATE PRACTICE

COMPLETE AND RETURN TO Email: [otoffice@uitweb.co.za](mailto:otoffice@uitweb.co.za) or Fax 0866515438

PERSONAL DETAILS						
Surname						
Name(s)						
<b>Physical Work/Practice Address</b> <b>Please note that only ONE practice address can be reflected</b>						
CONTACT DETAILS (can only reflect 2 numbers)						
Tel (W)			Cell:			
QUALIFICATION						
What qualification have you obtained?						
In which year was the qualification obtained?			Where was the qualification obtained?			
Name any postgraduate qualifications obtained and year in which obtained						
FIELDS OF PRACTICE						
Neurology Adult	Neurology Paediatric	Physical Adult	Physical Paediatric	Psychiatric Adult	Psychiatric Paediatric	Developmental Delay
Early Intervention	Burns	Cardiology	Consultancy	Domiciliary / Community	Community	Geriatrics
Groups	Hands	Hearing Impaired	Head Injuries	Medico-Legal	Primary Health Care	Vocational Rehabilitation
Orthopaedic	Other :					

Please note that by signing this form and submitting your information we shall be able to publish the information for public view on the OTASA website [www.otasa.org.za](http://www.otasa.org.za)

Signature: \_\_\_\_\_

Date of Submission: \_\_\_\_\_