SAGA
SOUTH AFRICAN
GUILD OF ACTORS

APPLICATION FORM – SAGA ASSOCIATE MEMBER

Dear Sir/Madam
I hereby apply for SAGA Associate Membership as from the month of _____ and undertake to pay the annual subscription in advance, as applicable, and to abide by the SAGA (South African Guild of Actors) Constitution and Membership Rules at all times. I also understand that all membership rights will lapse after one (1) month of non-paymentor non-renewal of annual subscription.

PLEASE PRINT

(MR/MRS/MS) SURNAME		FULL NAME	
ID NUMBER		DoB	
TEL (H)		TEL (W)	
MOBILE		EMAIL	
POSTAL ADDRESS		CODE	

List relevent training and experience

Important Information
SAGA Associate Membership is open to any person who is engaged or about to be engaged as a professional actor and who is legally entitled to work in South Africa. Associate Membership is renewable up to a maximum period of two years, but can be upgraded to Full SAGA Membership at any time, subject to a SAGA specified waiting period. In addition to preferential access to training opportunities and certain discounts, SAGA Associate Members enjoy the support of the Guild and its Executive Committee in all work related matters. Legal queries can be addressed by our Executive Committee, however all formal legal action offered as part of the Guild's legal services offering is reserved for full SAGA Members only. Any legal action by Associate Members would be for their own account. Membership is renewable annually, effective 1 March to 28 February the following year. New members joining during the course of a year will pay a pro rata subscription fee for the first year. Subscription fees are payable upon receiving a SAGA invoice. Membership will only be activated once SAGA has received payment. Renewal fees must be paid no later than 15 March each year. For more information, contact the SAGA administrator at admin@saguildofactors.co.za.

You hereby declare and confirm that you, as the SAGA member providing information, do hereby irrevocably agree and understand that any/all information supplied or given to SAGA, is done so in terms of the Protection of Personal Information Act 4 of 2013 (POPI Act) including any amendments. SAGA may collect, hold, use and disclose your personal information while you are registered as a member for the purposes of administration and organisational requirements. The information we hold may include but is not limited to; your legal and professional name, email address, a home, postal or other physical address, other contact information, cv, photograph(s), your title, birth date, gender, race, contracts, and banking details. Your information will be accessed by SAGA on password and anti-virus protected computers, stored in the cloud or on password protected servers managed by a third-party service provider, which may be located outside of South Africa. Where SAGA shares your information, we will take all precautions to ensure that the third party will be POPI complaint and will treat your information with the same level of protection and confidentiality required by the POPI Act. Should you no longer be a member, your information will be kept for no longer than 10 years upon which the SAGA information officer will delete your personal information. Particular information such as name and phone number may be kept for longer for record keeping purposes.

I hereby authorise and consent to the organisation storing and sharing my personal information for these purposes.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD THE ABOVE AND AGREE TO ADHERE TO THE SAGA CONSTITUTION.

SIGNATURE

DATE

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