

Insurance Institute of KwaZulu-Natal

PO Box 20998
Durban
4016
KwaZulu-Natal
South Africa



Membership
Melissa Johnson
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MEMBERSHIP APPLICATION 2021

Company Name & Address:	Date	
	Company VAT Number	
	<i>Tick Appropriate Box</i>	
	Renewal	
	New Application	

On behalf of (Company/Individual name) _____

I hereby apply for the following individual/s to be members of the Insurance Institute of KwaZulu-Natal

Note – R50 discount per member, applied to 2021 Membership fee in consideration of COVID19 business impact

Type of Membership	No of members	Total Cost
Individual members @ R105 less 2021 discount = R55 per member		
Non-Insurance related service providers @ R100 each less 2021 discount = R50		
Corporate Companies with 50 members or more @ R90 each less 2021 discount = R40		

Member Name & ID Number	Member Email address	Membership Number

* Companies applying for membership (new or renewal) for more than 10 persons can include an Excel Spreadsheet

Approved and Accepted by		Office Representative Details	
Name		Name	
Signature		Email	
		Tel	

* Proof of payment and application form to be sent to melissa.johnson@ominsure.co.za

Banking Details
Insurance Institute of KwaZulu-Natal
Standard Bank
Branch: Kingsmead (040026)
Account Number: 050402102

The IIKZN as the service provider agrees and covenants that it shall:

- (i) Keep and maintain all your personal information in strict confidence, using such degree of care as it is appropriate to avoid unauthorized access, use or disclosure;
- (ii) Use and disclose your personal information solely and exclusively for the purposes for which the personal information, or access to it, is provided pursuant to the terms and conditions of your membership, and not to use, sell, rent, transfer, distribute, or otherwise disclose or make available personal information for the IIKZN's own purposes or for the benefit of anyone other than yourself without your prior written consent; and;
- (iii) not directly or indirectly, disclose personal information to any person (an unauthorised 3rd party) other than IIKZN Council members, any agents, outsourcers or accountants, without express written consent from you, unless and to the extent required by Government Authorities or as otherwise to the extent expressly required, by applicable law, in which case, the IIKZN shall:
- (iv) Use best efforts to notify you before such disclosure or as soon thereafter as reasonably possible;
- (v) Be responsible for and remain liable to you for the actions and omissions of such unauthorized 3rd party concerning the treatment of such personal information as if they were the IIKZN's own actions and omissions; and;
- (vi) Require the Unauthorized 3rd party that has access to personal information to execute a written agreement agreeing to comply with the terms and conditions of this agreement, relating to the treatment of personal information.