

# Insurance Institute of KwaZulu-Natal

PO Box 20998  
Durban  
4016  
KwaZulu-Natal  
South Africa



Membership  
**Melissa Johnson**  
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☎ +27 (0)83 601 2210

## MEMBERSHIP APPLICATION 2022

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

On behalf of (Company/Individual name) \_\_\_\_\_

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

Type of Membership	No of members	Total Cost
Individual members @ R105		
Non-Insurance related service providers @ R100		
Corporate Companies with 50 members or more @ R90 each		

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](mailto: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 3<sup>rd</sup> 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 unauthorised 3<sup>rd</sup> party concerning the treatment of such personal information as if they were the IIKZN's own actions and omissions; and;
- (vi) Require the Unauthorized 3<sup>rd</sup> 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.