



# SAIA FREE STATE

Free State Region of the  
South African Institute of Architects



## PRACTICE INFORMATION

New Practice

Updated info

Dated: \_\_\_\_\_

New Practice Name: \_\_\_\_\_

Existing Practice Name: \_\_\_\_\_

Name: \_\_\_\_\_

VAT No: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Country: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Tel No: \_\_\_\_\_

URL Address: \_\_\_\_\_

Fax No: \_\_\_\_\_

e-mail: \_\_\_\_\_

### OFFICE USE ONLY

Date Enrolled (SAIA):	
Date Registered (SACAP):	yyyy/mm/dd

### Principals of your Practice

(including yourself):

Account Number (Office use only)	Surname	Initials	SAIA Member <input type="checkbox"/>

### Employees in your Practice:

Account Number (Office use only)	Surname	Initials	SAIA Member <input type="checkbox"/>

Expertise: 1. \_\_\_\_\_ 2. \_\_\_\_\_

(Please select only five) 3. \_\_\_\_\_ 4. \_\_\_\_\_

5. \_\_\_\_\_