



DECLARATION

I hereby apply to become a member of the Botswana Society for Emergency Care and declare that the details furnished above are true and correct to the best of my knowledge and belief. I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable of it.

Signature of the Applicant: _____

Date: _____ (dd/mm/yyyy)

Required Attachments

- a. Copy of ID/Passport

FOR OFFICIAL USE ONLY

Approved _____

Declined _____

Name and signature of Authorised Signatory on behalf of the committee

Date: _____

Stamp: