



Association of Corporate Treasurers of Southern Africa

NPC (Registration No. 1989/000817/08)

Tel. (011) 482-1512
Northwards, 21 Rock Ridge Road, Parktown, 2193

Website: www.actsa.org.za
E-mail: agalatis@actsa.org.za

ACTSA Individual Membership KZN / Cape Region

Shaping the Future of Corporate Treasury

The Association of Corporate Treasurers of Southern Africa (ACTSA) is the leading professional body dedicated to advancing excellence in corporate treasury management.

Established in 1988 and led by practicing treasury professionals, ACTSA sits at the centre of the treasury ecosystem—bringing together corporates, financial institutions, regulators, auditors, and service providers to strengthen the profession and support economic growth across South and Southern Africa.

As a non-profit organisation, ACTSA reinvests all membership and sponsorship support into education, advocacy, and thought leadership. Through high-impact conferences, specialist workshops, authoritative publications, and innovative e-learning in partnership with the University of the Free State, ACTSA equips treasurers to manage risk, unlock value, and lead with confidence in an increasingly complex financial environment.

ACTSA is more than a professional association, it is the collective voice of treasury in South Africa. Corporate membership enables your organisation to contribute to the development of the profession while benefiting from insight, influence, and connection.

Why Individual Membership Matters

Individual membership of ACTSA connects you to the heart of the treasury profession and supports your growth as a trusted financial leader. **Build Capability**

➤ **Grow Your Expertise**

Stay at the forefront of treasury best practice through access to conferences, workshops, seminars, and specialised e-learning developed in partnership with the University of the Free State.

➤ **Connect with the Profession**

Engage with a powerful network of corporate treasurers, bankers, auditors, regulators, and industry specialists who share real-world insights and practical experience.

➤ **Advance Your Career**

Gain visibility within the treasury community, access exclusive career opportunities, and stay informed on market and regulatory developments shaping the profession.

➤ **Learn from Global Best Practice**

Benefit from ACTSA's internationally recognised Charter of Best Practice in Treasury Management and global insights through ACTSA's membership of the International Group of Treasury Associations.

➤ **Be Part of the Voice of Treasury**

Contribute to shaping the future of the profession through dialogue, advocacy, and engagement on key treasury and risk management issues.

Directors:

Ms C Henry, Mr K Hoff, Ms A Khaas, Ms J Marais (Chairperson), Ms S McGinn, Mr JF Mol, Mr TJ Starke
Mr ID Thompson, Mr WF Reitsma

- Preferential member rates for ACTSA events and training
- Complimentary access to The SA Treasurer, ACTSA's flagship annual publication
- Access to thought leadership, research, and industry updates
- Participation in South Africa's only dedicated forum for treasury professionals

General:

- a) *Individual* Members of ACTSA have voting rights and may be elected to the Board.
- b) Corporate Members, as well as Individual and Professional Members have voting rights.
- c) The rights and obligations of a Member will not be transferable. The rights and obligations of Members are set out in ACTSA's Memorandum of Incorporation.
- d) All members will receive invitations to the events and receive *The Southern African Treasurer*.
- e) Experience in Treasury is defined as a minimum of three years' experience in:

Liquidity Management
Funding Management
Treasury Admin.

Currency Management
Risk Management
Corporate Finance

INDIVIDUAL MEMBERSHIP 2026		AMOUNT
		R 2556.52
	VAT	R 383.48
	TOTAL	R 2940.00

Directors:

Ms C Henry, Mr K Hoff, Ms A Khaas, Ms J Marais (Chairperson), Ms S McGinn, Mr JF Mol, Mr TJ Starke
Mr ID Thompson, Mr WF Reitsma

Application for Membership

ACTSA aims to provide continuing opportunities for the exchange of knowledge between treasurers and industry experts, and promote an ongoing interaction between its members.

Please complete and e-mail the application to: admin@actsa.org.za / agalatis@actsa.org.za.

For any queries, please contact Artemis Galatis on Tel. No. (011) 482-1512

Please do not send the Membership Fee with this application – an Invoice will be e-mailed .

1. Basic Information

Title:	First Name/s:
--------	---------------

Surname:

Date of Birth:	Nationality:	ID No.:
----------------	--------------	---------

Name of Organisation:

Designation (eg. – Treasurer, CFO):

If you have a Personal Assistant, please include her/his name and e-mail address:

CONTACT DETAILS			
e.g.	Country Code 27	Area Code 11	Number 444-3345
Work:			
Home:			
Fax:			
Mobile:			

E-mail @ work:	Alternate E-mail:
----------------	-------------------

Organisation Postal Address:	
	Code:

Organisation Physical Address:	
	Code:

Directors:

Ms C Henry, Mr K Hoff, Ms A Khaas, Ms J Marais (Chairperson), Ms S McGinn, Mr JF Mol, Mr TJ Starke
Mr ID Thompson, Mr WF Reitsma

1. (continued) Additional Organisation Information

Organisation Registration No.:	Organisation VAT No.:
--------------------------------	-----------------------

Main Business Activity (sector):

If the Organisation is part of a bigger Group, name of the “Holding” Co.:

If the Organisation is listed on a Stock Exchange – Name of the Exchange:	Organisation Code
---	-------------------

Is the Organisation / Group foreign controlled?	YES		NO	
---	-----	--	----	--

2. Academic history:

Qualification:	Qualification:
Institution:	Institution:
Period:	Period:
Period:	Period:

Qualification:	Qualification:
Institution:	Institution:
Period:	Period:
Period:	Period:

3. Employment History

3.1 Present your past appointments in reverse chronological order:

From	Period To	Organisation	Designation	Description

Directors:

Ms C Henry, Mr K Hoff, Ms A Khaas, Ms J Marais (Chairperson), Ms S McGinn, Mr JF Mol, Mr TJ Starke
Mr ID Thompson, Mr WF Reitsma

3.2 Analysis of years of experience in key treasury activities:

Treasury Activities	Years Experience				
	None	< 2 years	2-3 years	3-5 years	> 5 years
Cash & Liquidity Management					
Funding Management					
Money & Capital Market Dealing					
Currency Management (FX)					
Treasury Risk Management					
Commodity Risk Management					
Treasury Admin (Back Office)					
Treasury Accounting					
Corporate Finance					

3.3 Please tick below against any areas in which you have above average expertise:

Cash Management		Treasury Risk Management	
Money Market Investments		Taxation	
Short Term Debt		Commodity Risk Management	
Long Term Debt		Export Finance	
Currency Management		Insurance Risk Management	
Futures, Options and Swaps		Treasury Admin (Back Office)	
Pension Fund Management		Project Finance	
Portfolio Investment Management		Mergers and Acquisitions	

Other (please specify)	

- 4.** Has the applicant (or his estate) ever been sequestered, convicted of an offence resulting from dishonesty, fraud or embezzlement, or an Organisation of which he was a substantial shareholder or director or a manager been placed under judicial management or in liquidation? If yes, explain:

- 5.** Any other information relevant to your application (e.g. professional memberships and qualifications, other courses and studies, etc.)

Directors:

Ms C Henry, Mr K Hoff, Ms A Khaas, Ms J Marais (Chairperson), Ms S McGinn, Mr JF Mol, Mr TJ Starke
Mr ID Thompson, Mr WF Reitsma

6. Declaration by the Applicant:

I certify that the information given above is correct and that I will conduct myself with confidentiality, integrity, independence and compliance, using my professional competence to carry out my duties. I agree to be bound by the terms and conditions of the Memorandum of Incorporation adopted October 31, 2013.

Signature of Applicant

Date

7. INDIVIDUAL MEMBERSHIP APPLICATIONS must be completed by a REFEREE.

Declaration by Referee

I, _____, have known the Applicant for _____ years. I am of the opinion that he/she is a worthy candidate for membership of ACTSA. I certify that I have read the statements in this form and that, to the best of my knowledge, they are correct.

Signature of Referee	ACTSA Membership No. (if applicable)	Date
Business / University:		
Business / University Address:		
Business Tel. No.:	Fax No.:	Code: E-mail Address:

FOR OFFICE USE ONLY:

Date approved: _____

Info captured by: _____

Date captured: _____

Directors:

Ms C Henry, Mr K Hoff, Ms A Khaas, Ms J Marais (Chairperson), Ms S McGinn, Mr JF Mol, Mr TJ Starke
Mr ID Thompson, Mr WF Reitsma