



D.H.P.S. ALUMNI      PO BOX 78      WINDHOEK      NAMIBIA

**DHPS ALUMNI MEMBERSHIP APPLICATION**

Surname: Mr and/or Mrs \_\_\_\_\_

Maiden Name: \_\_\_\_\_ First Name(s): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Attended DHPS from year: \_\_\_\_\_ until: \_\_\_\_\_

Grade leaving DHPS: \_\_\_\_\_

Postal address: \_\_\_\_\_

Home telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

email: \_\_\_\_\_ Fax: \_\_\_\_\_

Tertiary education institution(s): \_\_\_\_\_

Current profession: \_\_\_\_\_

Do you have children attending DHPS: Yes, from ..... until .....  
No

I hereby give my consent that the ASV and the DHPS may contact me at the address above, send me information about current events etc. and pass on my contact details to other alumni on request. (please tick!)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The annual membership fee is N\$150 per individual, or N\$300 per married couple. Students up to the age of 28 years pay N\$50 per year. First payment of the annual membership fee should kindly accompany your application for membership.

If paying by EFT please email the proof of payment to the address given at the bottom of the page. Banking details are given below.

Thank you very much!

**Banking Details:**

**DHPS Altschülerverband (Namibia)**

First National Bank: Account No. 62214059603; Branch Code: 281-972; Windhoek Commercial Unit

Please quote as reference: **Alumni and your surname and initials.**  
Kindly email the transfer confirmation to [asv@dhps-windhoek.com](mailto:asv@dhps-windhoek.com)