



Health Professions Councils of Namibia

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Pharmacy Council of Namibia

Please complete this form in full. Completed forms must be addressed to the Registrar

Application for a copy of the register in respect of registered persons or practices

A

Profession/Practice _____

A non-refundable application fee of N\$1,450.00 for Namibians and N\$ 5,800.00 for Non-Citizens is payable for every 50 persons (names) or practices on a register.

B

Personal Particulars of Applicant

Surname

	Prof./Dr. Mr. / Ms
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First Names

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Client (Account) No.
(if registered with
Council)

--

Residential Address

--

Postal Address

--

Telephone

Home

--

Fax

--

Work

--

email

--

Cell

--

Please print e-mail address clearly

C

Please state clearly what type of information (numbers per profession, personal details, etc) is required:

Please indicate why the information is needed and for what purpose it will be used:

Signature of Applicant

Date

Business stamp (if applicable)