



Membership Nomination Form

Mr.Mrs.Miss.Ms

First name: _____

Surname: _____

Occupation: _____

Address: _____

Email: _____

Phone Number: _____

Cell: _____

Date of Birth: ___/___/_____

Your address, phone number and date of birth are required to process your membership. These details will not be displayed, only management have access to this information.

Have you ever been refused membership or expelled from any chartered club? **YES / NO**

If yes please advise name of club:

Have you ever been convicted of any crime under the crimes act? **YES / NO**

Are you a NZ citizen? **YES / NO**

*Enclosed is my Nomination fee of \$10.00

*If accepted as a member I will pay my subscription due when I receive an invoice.

* I will abide by the rules and Constitution of the club.

*I certify that all details are true and correct.

*I authorise the club Executive Committee to make any additional enquiries to establish my suitability as a member of this club

Signed: _____ Date: ___/___/_____

For Staff Use Only:

Receipt Number Issued: _____ Staff Name: _____