



MEMBERSHIP FORM

Please complete all details Clearly

NAME: _____

ADDRESS: _____

PHONE: (hm) _____

(wk) _____

(mob) _____

EMAIL: _____

DATE OF BIRTH: _____

OCCUPATION: _____

NZMAA No: _____

FREQUENCIES USED: _____

MEMBERSHIP TYPE:

Please Circle

Senior	\$30
Junior	\$20
Family	\$40
Associate (Newsletter only)	\$30

NZMAA AFFILIATION:

Senior	\$62
Junior	\$20
Family	\$67
None (affiliated through another club)	\$0

TOTAL AMOUNT: \$ _____

Two Payment Options :

**Snail-mail - with Cheque made out to AucklandSoar Inc.
36 Ripon Cres Meadowbank Auckland 1072**

or

**Pay online to the club bank account
National Bank, Onehunga. A/C No 06 0209 0085092 00
Make sure you identify yourself to enable us to correctly credit you.**

PERSONAL INFORMATION PRIVACY ACT 1993 - In accordance with the Privacy Act 1993; I authorise AucklandSoar to use such personal information as listed on the membership form for the purpose of planning and promoting AucklandSoar activities, communicating information to me concerning my membership responsibilities and/or listed interests, publishing competition results, mailing of the Club's Official Publication, providing general statistical information to approved organisations and any other lawful purpose relating to membership of AucklandSoar.

Signed

Date