



APPLICATION FOR MEMBERSHIP

Please complete and forward to the Treasurer with your cheque. See subscription rates below.

Name:

[First Applicant]

Name:

[Second Applicant]

Postal address:

Suburb: _____ Postcode _____

City: _____

Home Phone: () _____ Work Phone: () _____

Mobile Phone: () _____

Email: _____

I/We wish to apply for membership of the Nature Photography Society of New Zealand and agree to abide by the Rules of the Society.

I/We am/are agreeable to my/our name(s) and contact details being published in the NPSNZ Membership Directory

Signature(s) _____

Date: _____

Signature(s) _____

Date: _____

Enclosed: \$ _____

A receipt and membership card will sent to the address above once your application has been processed. Please allow up to 14 days.

2012 Subscription Rates are : \$50.00 Single, \$80.00 Family

Please make cheques payable to:

Nature Photography Society of New Zealand Inc

Send application plus cheque to:

NPSNZ Treasurer

P O Box 8479

Christchurch 8440