

PUKEKOHE COSMOPOLITAN CLUB
APPLICATION FOR MEMBERSHIP

Please Attach
Photo Here

TO ACTIVATE THIS APPLICATION FOR MEMBERSHIP
PLEASE FORWARD WITH YOUR APPLICATION YOUR

- 1 PHOTOGRAPH OF APPLICANT.
- 2 ANNUAL SUBSCRIPTION PAYMENT OF...
 - \$60 STANDARD MEMBERSHIP (AGED BETWEEN 19 - 60 YRS)
 - \$35 SENIOR MEMBERSHIP (OVER 60 YRS).
 - \$20 YOUTH MEMBERSHIP (15 - 18 YRS)

SURNAME: _____ MR / MRS / MISS / MS

CHRISTIAN NAMES: _____

ADDRESS: _____

EMAIL _____

CONTACT PHONE NUMBERS - HOME _____ WORK _____ MOBILE _____

DATE OF BIRTH _____ EMPLOYED AS _____

Have you been a member of this Club before? YES / NO

Have you been refused or had your membership revoked from any other Club? YES / NO. If yes please give name of Club and details: _____

Please state Sports Sections that are of interest to you: _____

I hereby agree to abide by the rules of the Club and certify that the information stated above is true and correct. If any of the information provided is false, it will result in automatic cancellation of your membership.

SIGNATURE _____ DATE _____

If you are new to the area or have no one to nominate you please leave this part of the form blank.

We the undersigned financial members of the Club certify we know the applicant personally and recommend him / her for membership.

PROPOSER _____
Print name and membership number

I have known the applicant for _____ years

SECONDER _____
Print name and membership number

I have known the applicant for _____ years

On acceptance as a member of the club, you will receive a letter to attend a welcoming meeting at the club and receive your membership card.

Information provided on this form may be given to the New Zealand Chartered Clubs Association for the express purpose of mailing to you the Inter Club Gazette.