WAITOMO CLUB INC MEMBERSHIP APPLICATION										
APPLICANT INFORMATION										
First Names:			Surnam	Surname:						
(Mr / Mrs / Ms / Miss)			Occupa	Occupation:						
Re	sidential address:									
Pos	stal address (if different f	rom above):								
Mobile Phone Number:			Alternate Phone Number:							
Email:					Date	of Birth:				
Has your membership ever been declined, suspende			ed or rev	oked	bv anv	club?	YES		NO	
	year memberemp ever	PRIVACY AC		- Citter	<i></i>	0.00.	. 20	,		
1.	The above named club is collecting, and will hold, the information on this form. The club is collecting the information:									
a	So it, and its members, can assess the applicant's suitability for membership (including transfers of membership);									
b	So it can administer its operation and assist other clubs that are members of New Zealand Chartered Clubs Incorporated (NZCC) to administer theirs;									
С	To enable NZCC or its agents to compile a list of members of all clubs in New Zealand and to send those members promotional, marketing and other material.									
2.	The applicant acknowledges by signing this form that he or she has authorized the club to obtain, check, exchange information with, and supply information to, members of the club, NZCC and other clubs that are members of NZCC.									
3.	The applicant is entitled, under the Privacy Act 1993 to have access to, and request correction of, personal information held by the club about the applicant.									
	reby agree to abide by the rules of th Il result in automatic cancellation of n		ormation is o	correct. I	acknowle	dge that if I h	ave given f	alse in	formation,	
(Signature of Applicant)				(Dated)						
	presentation of this form your fees sh	all be paid. If payment is not receive			ill not be p	rocessed.				
	e know the applicant persembership.	sonally and in accordance	e with Ru	ules, r	ecomn	nend the	applica	nt fo	r	
Proposer: * I have known the applicant				Prop	Proposer's Name & Membership No.					
years		(Signature of Proposer)							
Executive: * I have known the applicant				Exec	Executive's Name & Membership No.					
years		(Signature of Executive	e)							
* Not required for Transfers OFFICE USE ONLY		Date Nomination Received:		Date R	Date Received:					