

TAUPO SKI CLUB (INC) MEMBERSHIP APPLICATION FORM



MEMBERSHIP TYPE

I/we wish to apply for following membership of Taupo Ski Club

<input type="checkbox"/> Full Membership	<input type="checkbox"/> Midweek Membership	<input type="checkbox"/> Summer Membership
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APPLICANT DETAILS

LAST NAME:	FIRST NAME:
EMAIL (for club communications):	
PHONE NUMBER:	DATE OF BIRTH:
OCCUPATION:	

SPOUSE/PARTNER DETAILS

LAST NAME:	FIRST NAME:
EMAIL (for club communications):	
PHONE NUMBER:	DATE OF BIRTH:
OCCUPATION:	

CHILDREN TO BE INCLUDED AS MEMBERS – Date of Birth required if under 18years

NAME:	DATE OF BIRTH:
NAME:	DATE OF BIRTH:
NAME:	DATE OF BIRTH:

ADDRESS DETAILS

RESIDENTIAL ADDRESS:
POSTAL ADDRESS: (If different from above)

Please share your reasons for joining Taupo Ski Club:

Do you have any skills that would be useful at work parties?

I HEREBY AGREE TO MAKE MYSELF FAMILIAR WITH THE RULES AND REGULATIONS OF THE
TAUPO SKI CLUB AND TO COMPLY WITH THEM AT ALL TIMES

I have read the Rules and Regulations

I agree to attend a Work Party

Signature: _____ Date: / /

The Constitution and Accommodation Rules are on our website: www.tauposki.nz

HARD COPY WILL BE SUPPLIED ON REQUEST YES/NO

NOMINATOR AND SECONDER

Nominator and Seconder are to be Club Members.

	NOMINATOR	SECONDER
NAME:		
PHONE NUMBER:		

As a Nominator or Seconder, you agree to attend a Joining Work Party with the Applicant

Nominator

Seconder

PRIVACY CLAUSE

Information gathered on this form is solely for Taupo Ski Club use and is not shared or sold to any third parties.

FOR OFFICE USE ONLY

Date Approved:

Date Entrance Fees Paid:

Date Work Parties completed:

Treasurer signed:

INVOICE DETAILS

Joining Fees @ \$200.00 each:

Subs:

Senior x
Intermediate x
Junior x

Work Party Levy:

Invoice #:

Total Amount:

INSTALLMENTS: (\$10 admin fee)

Invoice Number:
Amount:
Date Paid:

Please email the completed form with cover letter to:
The Secretary, by email secretary@tauposki.nz
or post to Taupo Ski Club, c/- 10 Wheretia Street, Taupo, 3330