



PO Box 14161, Hamilton 3252, New Zealand

P: 07 855 4776
E: admin@showingwaikato.co.nz
www.waikatoaandp.co.nz

APPLICATION FOR MEMBERSHIP

I _____

Full Name

Of (full address)

PHONE: _____ EMAIL: _____

Signed _____ Date _____

Date approved (office use) _____

If you have any queries please contact us on the number above.

ANNUAL MEMBERSHIP FEE

TAX INVOICE _____ (Office Use Only)

GST Number : 15-600-252

DESCRIPTION	AMOUNT
Subscription 1 st February 2019 to 31 st January 2020	26.07
SUB-TOTAL	26.07
GST	3.93
TOTAL	\$30.00

Please fill in this application, take a copy for yourself and return with payment to:
Waikato A&P Association, PO Box 14161, Hamilton 3252.

OR

Direct Credit to: BNZ 020316 0400334 00