



PO Box 14161, Hamilton 3252, New Zealand

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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 2020 to 31 st January 2021	26.07
SUB-TOTAL	26.07
GST	3.93
TOTAL	\$30.00

Payment Options:

Direct Credit to: BNZ 020316 0400334 00
Ref: [Membership]

Cheques made payable to: Waikato A&P Assn