



Date:

APPLICATION FOR MEMBERSHIP

Please note that our rules provide for membership by individuals, not households.

I/we wish to apply for membership of the Northcote Residents' Association Inc. and agree to be bound by the rules of the Association.

Signed

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|--|-------------|----------------------|------------------------------------|--|------------|
| Resident/Ratepayer of Northcote <small>Circle Yes or No</small> | Yes | Full | No | Associate | Living in: |
| Surname: | First Name: | | Surname: 2 nd person | First name: | |
| Street address: | | | | | |
| Postal address: If different | | | | | |
| Email address/es: | | | | | |
| Phone number/s: | | | | | |
| Annual fee: \$25 | x 1 or x 2 | \$ | | | |
| Donation: | | \$ | | | |
| Total payment: | \$ | Cash/cheque enclosed | or | I/we have paid the total into the Association's Kiwibank account 38-9018-0158472-00 and have put name/s in Ref. and 2017sub in Code. | |

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| If posting, send to: | The Secretary, Northcote Residents' Association, Box 34-0235, Birkenhead, Auckland 0746 |
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