



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

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 2018sub in Code.	

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