

**NORTHCOTE
RESIDENTS'
ASSOCIATION**

Box 34-0235, Birkenhead, Auckland 0746



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>	<input type="checkbox"/> Yes	<input type="checkbox"/> Full	<input type="checkbox"/> No	<input type="checkbox"/> Associate	Living in:
Surname:	First Name:			Surname: <small>2nd person</small>	First name:
Street address:					
Postal address: <small>If different</small>					
Email address/es:					
Phone number/s:					
Annual fee: \$25	<input type="checkbox"/> 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 2020sub in Code.	

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