

The Waikato Tramping Club (Inc.)

PO Box 685, Hamilton 3240 www.wtc.org.nz

Member of Federated Mountain Clubs of New Zealand (Inc.)

MEMBERSHIP APPLICATION FORM

for

Tramping Section - Waikato Tramping Club

Please forward this application form with first subscription payment to: The Secretary, Waikato Tramping Club, PO Box 685, Hamilton 3240 Or scan and email form to: waikatotrampingclub@gmail.com and pay online - see bank details at bottom of this form

I / We wish to apply for membership, and if elected, agree to comply with the rules of the Waikato Tramping Club (Inc.)				
	First Name *Last Name		Occupation	
Senior (18 years and over)				
Senior (18 years and over)				
Junior# (14-17 years only)				* Date of Birth / /
# Children under 14 years of parents are club members	eannot join the club. They howeve s. They are charged junior non-me	er can join in club activember rates if parents	ities with the approval of the trip leader and a are not club members. A parent or guardian r	re charged junior member rates for trips, if nust accompany them at all times.
* Residential Address#		Postal Address (if different from Residential)		
	Postcode		Postcode	
# New members living outside	de the Waikato region are entitled	to full membership be	nefits but are excluded from voting rights at g	general meetings of the club.
* Phone (include details for a	all Senior applicants)			
(Mobile)		(Home)	Receive	e Bulletin by Email
Email			(tio	ck one) or Hard Copy
(Email used only for contact an	nd / or circulation of club informati	on)		
How did you find out abo	out the club?			
* Signature of Applicant	Senior)			* Date: / /
* Signature of Applicant (Senior))			* Date: / /
	All information supplied is for Th	e Waikato Tramping C	lub use only and will not be disclosed to any	other parties.
FIRST SUBSCRIPTION Tramping Section	,			
			A 20% discount is available for	or combined membership of
	er)		Tramping & Ski sections (excl	luding joining fees)
	members at same address)		Senior Combined subscription	1 \$132.50 Joining fee \$50.00
	bulletin only)			
These amounts include a	once only joining fee of \$10.0	0 per subscription.		
Then email the Waika	Please enter you	t payments can be r Name in Particul	PIRECT CREDIT The made to: 03 1555 0091625 02 The made to: 04 1555 009162 02 The made to: 04 1	them payment has been made.

Office Use Only

Amount Paid \$

Receipt No:

NMP: