



New Membership Form

Dear New Supporter,

Thank you for deciding to join the Supporters of Tiritiri Matangi. We are delighted that you are able to offer your support for our wonderful Island and the work that we do there.

Please complete the following sections and then return this form to our membership secretary at the address below.

Name(s) _____

Address _____

Email _____ Phone _____

Subscription amount

Regular \$30 (individual & family), Student with NZ address \$15, Overseas \$35.

Donations welcome

Total enclosed

By completing this application and paying the subscription, I consent to becoming a member of Supporters of Tiritiri Matangi Incorporated. (Please tick the box for consent)

Payment Options

Internet Banking:

Account Number: **12 3059 0283520 00**

Account Name: **Supporters of Tiritiri Matangi**

Particulars: **Membership**

Code: **Full Name**

Reference: **New**

Credit card:

Visa

Mastercard

Card number: _ _ _ _ / _ _ _ _ / _ _ _ _ / _ _ _ _

Expiry Date _ _ / _ _

Name on card _____

CSV No _____
(three digit number from back of card)

Please send the completed form with payment / payment information to:

Membership Secretary, Supporters of Tiritiri Matangi Inc,
PO Box 90 814, Victoria Street West, Auckland 1142

Or scan and email to membership@tiritirimatangi.org.nz

Please note that each membership must be approved by the Committee - Payment will be refunded if membership is not approved