

MEMBERSHIP APPLICATION FORM



I wish to apply for Senior / Junior / Family membership of the Temple Basin Ski Club Inc.

Temple Basin Ski Club Inc.
P.O.Box 1228 Christchurch,
New Zealand.
www.templebasin.co.nz
TEL + 64 3 377 7788
FAX +64 3 377 7798
EMAIL info@templebasin.co.nz

Date _____ / _____ / _____

Applicant's Full Name _____

Postal Address _____

Email Address _____

Phone Number _____

Mobile Number _____

Nominated by _____

Seconded by _____

Junior members are those under the age of 18 years on 1 February 2010 and attending a primary or secondary school in the current year and must state their date of birth _____ / _____ / _____

Signature Applicant _____

Signature Nominator _____

Signature Seconder _____

For family membership please add

Name of Spouse _____

Names and dates of birth of children _____

Membership: Initial Joining Fee \$25

Annual Subscription: Senior - \$48 Family - \$96 Junior - \$25

All fees include GST

Payment can be made by cheque or credit card (Visa or MasterCard only).

Credit Card Number _____ Amount of Payment \$ _____

Name on Card _____ Expiry Date _____ / _____