

CLUB NO:	37	CLUB:	Rotorua Model Aircraft Club Inc		
MFNZ No:		(If pr	(If previous membership lapsed)		



Α	APPLICANT'S DETAILS:								
	NAME:	Mr, Mrs. Ms (DELETE TWO) (FIRST NAME) (THREE LINES MAXIMUM)		(SURNAME)					
	ADDRESS:								
				POST CODE:					
	E-MAIL:								
	PHONE:	MOBILE:							
	DATE OF BIRTH: (REQUIREMENT OF INCORPORATED SOCIETIES) OCCUPATION			(REQUIREMENT OF INCORPORATED SOCIETIES)					
В	SUBSCRIPTIONS 1/04/2024 - 31/03/2025								
	SENIOR* JUNIOR (Under 1 JUNIOR(18 to 25) FAMILY (Head)* SOCIAL (Non-flyi ASSOCIATE # # CLUB NAME: INCLUDED FA	\$210 18 years)* \$45 years)* \$115 \$220 ng) \$50 \$115	[] JUNII [] NON [] * Includes N [] # Includes R	OR (Under 18 years) OR (18 to 25 years) -FLYING MFNZ affiliation & RMAC r MAC newsletter. Must beNo:	[] [] [] [] newsletter e MFNZ affiliated club memberMFNZ No:				
	Name		DoB	Occupation _					
	Name		DoB	Occupation					
D	PERSONAL INFORMATION PRIVACY ACT 1993 In accordance with the Privacy Act 1993; I authorise the MFNZ to use such personal information as listed on the membership form for the purpose of planning and promoting MFNZ activities, communicating information to me concerning my membership responsibilities and/or listed interests, publishing competition results, mailing of the Association's Official Publications, providing general statistical information to approved organisation and any other lawful purpose relating to membership of the MFNZ.								
	Please	Please check the box to confirm information is true and correct							
	Signature:			Da	ate:				