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**WAIATARUA RESERVE PROTECTION SOCIETY  
INCORPORATED**

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**APPLICATION FOR MEMBERSHIP**

I/We wish to apply for membership to the Waiaatarua Reserve Protection Society Incorporated.

NAME	SIGNATURE	MEMBERSHIP TYPE	OCCUPATION

Address:

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Email:

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\_\_\_\_\_

Phone

( ) \_\_\_\_\_

Date:

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**Membership fee**

Adults \$2	<input type="checkbox"/>	Junior \$0.50	<input type="checkbox"/>	Corporate \$2	<input type="checkbox"/>	Total Paid	<input type="checkbox"/>
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I understand that my application for membership is subject to final confirmation of the Committee. Copies of the rules of this Society are available from any committee member upon request, and also on the Companies Office web-site, [www.companies.govt.nz](http://www.companies.govt.nz), or on [www.waiatarua.com](http://www.waiatarua.com)

Please note that email correspondence will be the preferred method of communicating with Society members, so please remember to keep us updated of any changes.

Please mail to PO Box 87414, Meadowbank, Auckland.