



# New Membership application

I wish to join the Wellington Botanical Society

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

The membership year is from 1 July to 30 June. Dues received after 1 May will be credited to the following year.

Ordinary membership	\$35.00	
Country (out of Wellington area)	\$30.00	
Group/family	\$40.00	
Student	\$10.00	\$ _____

Donation to the Jubilee Award Fund (Donations to Wellington Botanical Society Inc. qualify for a New Zealand tax rebate)		\$ _____ (Optional)
	Total paid	\$ _____

Please make payment to: **Wellington Botanical Society Inc.**

Bank Account:	<b>02 0536 0017812 00</b>
Particulars:	<i>Name</i>
Code:	<i>Membership type</i>
Reference:	<i>amount of any included donation</i>

## Authority to hold your name, address and phone number with the Society.

The Society holds the name, address, email and contact phone numbers of all current and life members to use for communication, and mailing of bulletins etc. Under the Privacy Act the circulation of names on such lists requires the approval of the individual members. The list will not be used for marketing, soliciting or political purposes.

I agree to my name and contact details being held on the membership list whilst I am a current paid up member. I understand that if my details are requested for use within the Wellington Botanical Society I will be notified. I understand that this list is to be used only by members of the committee.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please **e-mail** this completed form to the Memberships Secretary at [wellingtonbotsocmembership@gmail.com](mailto:wellingtonbotsocmembership@gmail.com)  
or post to Wellington Botanical Society Inc:  
**Memberships Secretary c/o Wellington Botanical Society Inc., PO Box 10 412, Wellington 6140**

[www.wellingtonbotsoc.org.nz](http://www.wellingtonbotsoc.org.nz)