



New Zealand Country Music Association Inc

(Established 1971)

P O Box 9049
Greerton
Tauranga 3142

NEW CLUB MEMBERSHIP APPLICATION

NAME OF CLUB _____

POSTAL ADDRESS _____

Contact Person _____

Phone Number _____

Email Address (2) _____

Club Formed _____

Incorporated YES/NO _____

Number of card holders _____

Please supply details of where and when your club days are held

We agree to abide by the rules as laid down in the constitution of the New Zealand Country Music Association Incorporated. We also agree to retain our membership for at least three years.
Fees are \$160.00

President _____ Secretary _____

Please print name _____

Committee _____

Member _____

Please print name _____

Office Use: Application received (date) _____

Payment received \$ _____

Receipt No. _____