

Change New Zealand Party Membership Form

Application form to join the *Change New Zealand Party*

Member's details

| | |
|--|--|
| Full name | |
| Residential street address Suburb, town, city or locality [not a PO Box address] | |
| Date of birth | |
| Telephone number/s | |
| Email address | |

Enrolment details

| | |
|---|---------------|
| I am a registered elector | YES/NO |
| enrolled in <u>Queenstown</u> electorate | |
| <i>Complete if you are not a registered elector</i> | |
| I am not a registered elector but I am eligible to enrol | YES/NO |
| You are eligible to enrol if you are a New Zealand citizen or permanent resident of New Zealand, 18 years old or older and have resided in New Zealand continuously for one year or more and are not disqualified from enrolling. Contact the Electoral Commission if you are unsure whether you are eligible to enrol. | |
| I am eligible to enrol as a New Zealand parliamentary elector as I am a (select one): | |
| <input type="checkbox"/> New Zealand citizen <input type="checkbox"/> permanent resident of New Zealand <input type="checkbox"/> other – please specify: _____ | |
| and I have lived continuously in New Zealand for _____ years _____ months. | |
| If you live overseas provide the date last in New Zealand ____ / ____ / ____ | |

Membership details

I enclose/have paid my membership fee of \$1.00 for a 1 year membership with this application.

Membership fees to be paid into bank account:

Name: ChangeNewZealand Limited

Account Number: 38-9027-0724149-03

I enclose/have paid my membership fee of \$1.00 for a 1 year membership with this application.

Membership fees to be paid into bank account:

Name: Change New Zealand

Account Number: **38-9027-0724149-03**

I authorise Change New Zealand to record my name as a financial member of Change New Zealand

I authorise the secretary of Change New Zealand to release this application form and subsequent financial membership details to the Electoral Commission for the purposes of Change New Zealand's registration under the Electoral Act 1993.

Signed _____
[Signature of person applying]

Date _____

Please forward completed form to changenewzealand@gmail.com