

## Master Plumbers Associate Organisation Membership Application Form

Cor	mpany Name:
Соі	ntact Name:
Prir	mary Business:
Em	ail:
Pho	one No:
Men	nbership fees:
Asso	ciate Organisation Membership - \$395+gst
	erm of this membership is based on membership fees being payable annually in advance from of membership confirmation.
Paym	nent Method (to be paid on invoice)
	Cheque (Please make cheques payable to Master Plumbers, Gasfitters & Drainlayers NZ Inc)
	Credit Card (We will contact you for your credit card details)
	Direct Debit (Please use bank account details below)
	Online Banking – Payment can be made to A/C 02-0560-0276048-00. Please use your membership number as a reference



## **l** agree

- to the terms and conditions of this application form and of the Rules of the Society (available on request) and (where applicable) of the Association, the Code of Conduct and Code of Practice (available on request) and any amendments adopted in accordance with the Rules of the Society;
- 2. to maintain a high level of ethics, and general business and trade practice as befitting the image the Society seeks to be associated with the Master Plumbers brand;
- 3. to provide such personal information reasonably required from time to time to support the objectives of the Society.

Signature:	Date
Register and to enable the information will als information about prod	on above is collected and will be held by the Society and/or Association as part of its Membership information about products and developments of interest to be sent to you. From time to time to be disclosed to organisations directly related to the industry who may wish to supply you with flucts which the Society or Association believes will be of interest to you. You have the right of access resonal information about you that we hold.
or office use only:	ACCEPT/DECLINE APPLICATION  The applicant is hereby ACCEPTED/DECLINED as a Member of the Society
Name: (please print)	
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