**HOE AROHA WHANAU O MAUAO**

**Outrigger Canoe Club Incorporated**

**Postal Address: PO Box** 10348**, Bayfair PO**

**MEMBERSHIP FORM**

(1st July 2016 to 30th June 2017)

This form is prepared in order for our club to maintain an accurate database of its membership. Your support in completing this form would be much appreciated.

Full Name: ……………………………………………………… Date of Birth: ………/………../…………

Address:…………………………………………………………………………………………………………....…………………………………………………………………………………………………..……………

Telephone (Home)………………………. (Work)………………..……… (Mobile)…………………….…

Email ……………………………………………………………………………………………………...……

Occupation: ………………………………………………………

Nga Kaihoe o Aotearoa ID # NZ…………………

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| **IF THIS IS A FAMILY MEMBERSHIP, PLEASE COMPLETE THE FOLLOWING:-** |
| **PARTNERS DETAILS**  Full Name: …………………………………………………………………………………………………..  Date of Birth. ………/………../………… Telephone (Work) ………………………..............................  Email ………………………………………………………………………………………  Occupation: …………………………………………………………………………………  Ngai Kaihoe o Aotearoa ID # NZ………………………………………………………. |
| **CHILDRENS DETAILS**  Full Name: …………………………………………………………………………………  Date of Birth. ………/………../………… NKOA ID # NZ………………… |
| Full Name: …………………………………………………………………………………  Date of Birth. ………/………../………… NKOA ID # NZ………………… |

Signature …………………………………………. Date…………………………….

**CLUB FEES:**

**Family $180.00 Junior 17-23: years $55.00 Intermediate 11- 13 Years $35.00**

**Open/Masters $90.00 Junior (16): 14 –16 years $45.00 Midgets 7 to 10 years $25.00**

**Non Paddler $5.00**

**Hoe Aroha Bank Account: Westpac 03 0374 018279300.**

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| **Receipt No:** | **Update Database:** | **Update Email List:** | **Secretary:** |
| **Date:** | **Post Info Pack:** |  |  |