AucklandSoar
Radio Control Soaring Club

MEMBERSHIP FORM

Please complete all details Clearly

NAME:

ADDRESS:

PHONE: (hm) **(wk)** **(mob)**

EMAIL: **DATE OF BIRTH:**

OCCUPATION: **NZMAA No:**

FREQUENCIES USED:

MEMBERSHIP TYPE:	***Please Circle***
Senior	$30
Junior	$20
Family	$40
Associate (Newsletter only)	$30
NZMAA AFFILIATION:	
Senior	$55
Junior	$20
Family	$62
None (affiliated through another club)	$0

TOTAL AMOUNT: $_____

Cheques should be made payable to : **AucklandSoar Inc.**
Please return completed forms with payment to :

Ted Bealing
36 Ripon Crescent
Meadowbank
Auckland

PERSONAL INFORMATION PRIVACY ACT 1993 - In accordance with the Privacy Act 1993; I authorise AucklandSoar to use such personal information as listed on the membership form for the purpose of planning and promoting AucklandSoar activities, communicating information to me concerning my membership responsibilities and/or listed interests, publishing competition results, mailing of the Club's Official Publication, providing general statistical information to approved organisations and any other lawful purpose relating to membership of AucklandSoar.

Signed **Date**