



New Zealand Chinese Association (Canterbury Branch) Inc.
紐西蘭堅都布厘華聯支會
 NZCA Canterbury, 22 St Asaph Street, Christchurch Central, Christchurch 8011

Membership Application Form

Annual 1st Jan- 31st Dec
 For 16 years and older

Please Print Clearly

Please add further applicants on this form if at same address

*Nominator must be an existing member

| Title Mr/Mrs/Miss Ms/Dr/Prof | Family Name 英文姓氏 | First Name 英文名 | Chinese Name 中文姓名 | DOB 出生日期 | Occupation 職業 | *Nominator required if New Applicant 推薦人 | Membership Annual 會費 Fee \$15 | New Member Entry Fee 新會員費加\$5 Add \$5 | Donations 捐款 | |
|------------------------------------|---------------------|-------------------|----------------------|-------------|------------------|--|--|--|-----------------|----|
| | Family Name | First Name | Chinese Name | DOB / / | Occupation | Nominator | \$ | \$ | \$ | |
| | Family Name | First Name | Chinese Name | DOB / / | Occupation | Nominator | \$ | \$ | \$ | |
| | Family Name | First Name | Chinese Name | DOB / / | Occupation | Nominator | \$ | \$ | \$ | |
| | Family Name | First Name | Chinese Name | DOB / / | Occupation | Nominator | \$ | \$ | \$ | |
| | | | | | | | Totals | \$ | \$ | \$ |
| Address | | | | | | | <i>Donations over \$5 have Tax Credit Claim Entitlement Please Tick <input type="checkbox"/> for receipt</i> | | | |
| Street Number | | Street Name | | | | | 總銀碼 Total Payment → \$ | | | |
| 地址 Suburb | | City | | Post code | | | | | | |
| Contact Details | | Name | | Name | | Name | | | | |
| Details 聯絡 | | Phone# | | Phone# | | E-mail address | | E-mail address | | |

Please Direct Credit to NZCA(Cant) bank account 03-0802-0003908-03 with reference **Surname, First name, Phone Numbers** in particulars

Please return all forms via post to address:- **NZCA Canterbury, 22 St Asaph Street, Christchurch Central, Christchurch 8011**
 or Email completed form to :- nzcacanterbury@gmail.com

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|--|--|--|--|---|--|
| Objectives for membership I/We volunteer to support NZCA Canterbury in the following: | | | | Preference for Receiving Newsletter | |
| Please Tick(✓) | | | | Please Tick(✓) | |
| <input type="checkbox"/> NZCA Sports Tournament | | <input type="checkbox"/> YLC/LDC Programme | | <input type="checkbox"/> E-mail <input type="checkbox"/> Post | |
| <input type="checkbox"/> Chinese school | | <input type="checkbox"/> Social Activities/Events | | | |
| <input type="checkbox"/> Translation | | <input type="checkbox"/> Others Please Specify _____ | | | |

Declaration: I/We apply to become a Member/s of the New Zealand Chinese Association Canterbury
 I/We agree to abide by the Rules of the Association on acceptance as a Member/s.

簽名 *Signed: _____

Date: ____ / ____ / ____