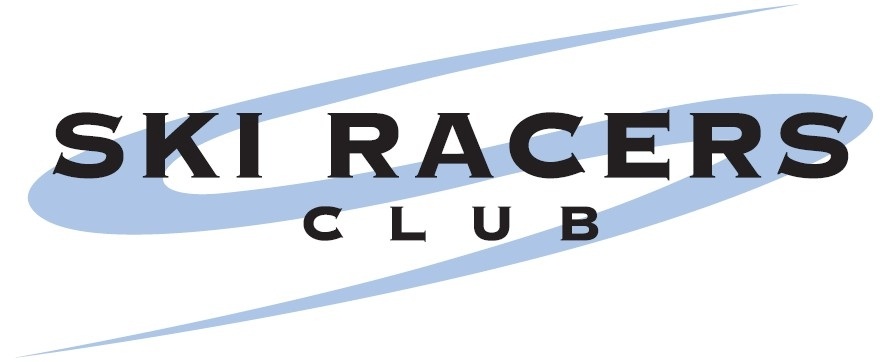
**MEMBERSHIP FORM **

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| FAMILY  Name | FIRST  Name | EMAIL address | DATE of  BIRTH | AMOUNT |
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| --- | --- | --- |
| ANNUAL SUBSCRIPTION | JOINING FEE | HUT FEES |
| Senior $210  Couple $345  Parents with children $405  One parent with children $270  Inactive Senior $75  Inactive Couple $115  Inactive Family $125  Inactive one parent with children $95  Locker (subject to availability) $30 | Joining Fee = $120 per Senior.  Joining Fee does not apply to Junior members.  When joining for example, parents with children would pay $120 + $120 + $405 for the first year, then annual subscription of $405 thereafter. | Rates per night:  Senior member (S) $42  Junior member 11-17 yrs (J17) $32  Junior member under 11 yrs (J11) $27 |

|  |  |
| --- | --- |
| DO YOU KNOW ANY MEMBERS OF SKI RACERS? | Total Amount |
|  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| YOUR CONTACT DETAILS | | | | | |
| Contact name |  | | | | |
| Home Phone |  | **Mobile** |  | **Work** **Phone** |  |

I apply to be a member of Ski Racers Club Inc in whose affairs I will take an active part. I agree to abide by the rules of Ski Racers Club Inc at all times (Club Rules can be found at [www.skiracers.co.nz](http://www.skiracers.co.nz) under Bookings). Membership is provisional for the first year and until Seniors have completed two work parties. The committee of Ski Racers Club (Inc.) must approve all applications.

Signed: Date:

|  |  |
| --- | --- |
| PAYMENT | Payment must be made at time of joining. |
| Total amount: | **Internet Banking**  Bank a/c no: 02 0144 0249948 00 (Enter “Subs”, “Your name”) |

**EMAIL COMPLETED FORM to lynettebroke@hotmail.com**

**For more information, please contact Lynette Brokenshire on 09 445 9190**

**INTERNAL USE ONLY:**

Signed – Work Party Officer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed – President \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approved/Declined Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Returned to Membership Officer Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_