



Hamilton Tramping Club

PO Box 19-296

Hamilton 3244

info@tramphtc.org.nz

NOMINATION FOR MEMBERSHIP FORM

I hereby apply to become a member of the HAMILTON TRAMPING CLUB INC and if admitted, agree to comply with rules of the club, which are available on the Club's website.

Category (please select): Ordinary/Family/Student/Associate member. Refer to website for category descriptions.

Name:

For family membership application, names of partner and children to be included

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Postal address:

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Contact Details:

Day:Evenings:Cell phone.....

Email:

I agree to my contact details being shared between club members for the purpose of organising club activities.

I agree to pay a subscription of \$..... within a month of my application being accepted and the full annual subscription thereafter.

The annual subscription is currently \$35 for individuals and families, \$20 for associates and students and runs from the 1st April to the 31st March. It is reduced to 2/3 after August 1 and 1/3 after December 1.

Payments can be made by cheque to the above address or on-line to account number 03-0318-0717044-00. Please enter your name and 'Subs' in the reference fields.

Applicant(s) (sign) (date)

Proposed by (sign) (name).....

Seconded by (sign)..... (name).....

OFFICE USE ONLY

Application received (date)..... Committee approval (date).....

Subscription paid (date)..... Amount: \$.....

Approval to Applicant (date)..... Sent by: