2015 MEMBERSHIP APPLICATION FORM

Your Name(s):					
Trading Name:				Oli	ves
Address: Postal:		Physi	cal:	Nev	w Zealand
Phone:	 fax: _		em	ail:	
Mobile:					
Membership Categories, Category	Fees and Voting Rig 1 Jan – 31 Dec 2015 Inc GST	hts Voting	Please Tick One		
Full Member > 250 trees	\$345.00	4			
Small Grove 101 - 250 trees Hobby Grove < 100 trees	\$172.50 \$86.25	1			
Associate Member*	\$172.50	0			
employees, and other interest voting rights, nor are they elig Olives New Zealand Certificated Nominated Region () Auckland () Bay of () Kapiti () Marlboometers.	ible for appointment to the tion Programme and if this	e Branch Exe s is required, ry () Centr	ecutive. Associthen must joi	ciate Members in under one of	do not have access to th the other Categories
In applying for membership of	.,	.,		` ,	
I understand that my application declining such application.	on must be accepted by t	he Executive	and that the	y do not need to	o disclose their reason fo
I do/do not agree to my conta members of the organization.	ct details being released b	by Olives Nev	w Zealand to	selected indust	ry partners and other
I understand that the passwor undertake not to divulge it to a		Olives New Z	ealand websi	te ¹ is issued to	me personally and I
Signature			// _ Date		
	ble to Olives New Zealand ade to Olives New Zealar				
Please mail to: Executive Offi Or email admin@olivesnz.org		Inc., PO Box	28140, Have	lock North. 41	57

¹ Please note access to the 'Members' section of the web site is ONLY available to financial members. You will receive your individual logon and password on receipt of your subscription