

Affiliating Club No: _____

Affiliation Form



A APPLICANT'S DETAILS

Mr, Mrs, Ms _____
(Delete two) (Initials)

(Surname)

Address: _____

_____ Post code: _____

Email address: _____

MFNZ No: _____
(If previous membership has lapsed)

Date of birth: _____

Occupation: _____
(Requirement of incorporated Societies)

B SUBSCRIPTION CATEGORY:

Tick one only

- Senior B1
- Junior B2
- Family (paid) B3
(If you pay the family subscription)

- Family (included) B4
(If you are included in a family membership)
- Life (MFNZ) B5
- Special B6

C FLYING CATEGORY:

Tick one only

Senior C1

Junior C2
(Must be under 18 years of age)

D FLYING INTEREST REGISTRATION:

Indicate all your interests by placing a tick in the boxes below

- | | | | | | |
|---------------|----------------------------|-----------------|-----------------------------|-------------------|-----------------------------|
| Free Flight | 1 <input type="checkbox"/> | Soaring R/C | 6 <input type="checkbox"/> | Scale Aerobatics | 11 <input type="checkbox"/> |
| Control Line | 2 <input type="checkbox"/> | Vintage | 7 <input type="checkbox"/> | Sport Flying | 12 <input type="checkbox"/> |
| R/C Scale | 3 <input type="checkbox"/> | Helicopter | 8 <input type="checkbox"/> | Electric | 13 <input type="checkbox"/> |
| Aerobatic R/C | 4 <input type="checkbox"/> | Pylon | 9 <input type="checkbox"/> | Park Flying | 14 <input type="checkbox"/> |
| Rally Flying | 5 <input type="checkbox"/> | F/F & C/L Scale | 10 <input type="checkbox"/> | First Person View | 15 <input type="checkbox"/> |

E PERSONAL INFORMATION PRIVACY ACT 1993

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

Signed _____

Dated _____