



REBUS NZ INCORPORATED

APPLICATION FOR AFFILIATION

NOTE: Please keep a copy of the completed application, and post the original to
PO Box 541, Whangaparaoa 0943 (or scan and email to rebus@clear.net.nz)

We, the
(please print name of Club clearly)

hereby apply for Affiliation with **REBUS NZ Incorporated**.

Our Club, at a duly convened meeting held on the/...../.....

Passed a Motion, A: to disaffiliate from Fellowship NZ Incorporated (if applicable) Tick (.....)

Passed a Motion, B: to seek full affiliation with **REBUS NZ Incorporated for
the period to 31 March 2018** Tick (.....)

Passed a Motion, C: to adopt the **REBUS** Constitution for affiliated Clubs. Tick (.....)

Club contact details:

Secretary's name.....Phone ()

Secretary's email address.....@.....

President's name.....Phone ().....

President's email address.....@.....

Third Officer (optional) Name.....Position..... Third Officer's email address
.....@.....

Club's postal address.....

.....Area Code.....

Please complete the following:

* Our Club currently has.....members, Men..... Ladies..... Total.....

* We enclose our cheque for \$.....payable to **Rebus NZ Incorporated** for Affiliation fees based on.....
members at \$2.00 per member.

Voluntary Donation. We are **pleased/unable** to include a small donation towards **Rebus's** ongoing operational costs of
\$.....making a total payment of \$.....

NOTE: If you wish to pay by direct deposit, our banking details are as follows:

12-3084 0009937 00

* I affirm that the information provided above is correct and that I am authorised to apply for
Affiliation on behalf of the above Club.

Name.....Position.....Date...../...../.....