

**NEW ZEALAND ASSOCIATION OF RADIO TRANSMITTERS INC.**

nzart.org.nz

Phone: (04) 939 2189

Email: nzart@nzart.org.nz

**- NZART MEMBERSHIP FORM -**

**MEMBER DETAILS -**

**- Have you previously been a member of NZART?**      **No**      **Yes**



\*First Name:

\*Surname:

\*Phone:

\*Email:

Callsign:

Secondary Callsign:

\*Street

\*Suburb:

\*City:

\*Postcode:

Country:

\*Date of Birth

(For statistical purposes only)

DD MM YYYY

Preferred NZART Branch (name or number):

**- Is anyone in your household currently a member of NZART?**      **No**      **Yes**

Name:

Membership Number:

Callsign:  

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**\*MEMBERSHIP TYPE-**

TRANSMITTING	\$125	NON-TRANSMITTING	\$125
FAMILY	\$30	OVERSEAS	\$165
STUDENT	\$10		

You will receive an invoice for membership 0-3 working days after submitting your application which will advise payment methods.

Date:

DD MM YYYY

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**Do you wish to subscribe to our monthly E-Newsletter?**      **No**      **Yes**

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## **Annual membership for NZART runs from January 1st to December 31st.**

Pro rata rates may be applied to new or memberships that have lapsed for more than 2 years, paying partway through the year.

**Full Year - \$125**

**After 30/03 - \$90**

**After 30/06 - \$60**

**After 30/09 - \$125 (includes the following year)**

- Transmitting members must be qualified licensed radio users and hold a callsign.

- Family members of an already financial member of NZART only pay \$30. This covers 1-5 family members at the same address only and is added to the subscription fee of the primary family member.

- Student members must be younger than 20 years old and provide a student ID in order to qualify.

Invoices for the following year are sent out in September. A \$15 rebate is applicable to Transmitting, Non-Transmitting and Family members only, if paid before 30 November.

**[BRANCH MAP - https://www.nzart.org.nz/contact/branches/](https://www.nzart.org.nz/contact/branches/)**

**[NZART CONSTITUTION - https://www.nzart.org.nz/nzart/constitution/](https://www.nzart.org.nz/nzart/constitution/)**

**I accept that I will be allocated a branch if I have not already chosen one.**

**I accept that my name, callsign, and contact information will be shared with the branch secretary, and understand this is required for annual voting purposes**

**I have read the rules of the NZART constitution and agree to abide by them.**

*E-Signature:*