

APPLICATION FOR MEMBERSHIP

First names:.....

Surname:.....

Title (Please circle)

Mr Mrs Ms Miss Dr Other:.....

Postal address.

Street:

City:

State/Province:

Zip/Postal code:

Country/Region:

Contact numbers:

Fax number:.....

E-mail:.....

Please enter any comments below:

**ENTOMOLOGICAL SOCIETY OF NEW ZEALAND (Inc)
SUBSCRIPTION ADVICE – Tax Invoice: GST No 17-644-707**

Subscriptions are now due and listed below included. Please advise the Treasurer if you are eligible for the Student, Retired or Unwaged rate.

NB If you have any outstanding amounts owing you will be notified with the WETA posting. (if you are getting this in a PDF file)

ALL ARE GST INCLUSIVE

Rates are as follows:

Full Members and Before 31st March \$65.00
Overseas After 31st March + \$5.00
Student / Retired Before 31st March \$45.00
Unwaged After 31st March + \$ 5.00

Please return this form and your cheque to: **The Treasurer**

Darren Ward
Treasurer
Entomological Society of New Zealand
Landcare Research
Private Bag 92170
Auckland
treasurer@ento.org.nz

You may wish to Direct Credit to 12 3153 0003994 00 but please make it clear who it is from. Payment can be made at any ASB branch or via the internet.

.....*Tear off and return with cheque*.....

Total Enclosed \$_____ Signed _____

Please also print your name: