



Membership Renewal Form

Dear Supporter,

Thank you for deciding to renew your membership. We are delighted that you are able to continue with your support for our wonderful Island and the work that we do there.

Please complete the sections below and return this form to our membership secretary. If you have a renewal notice, please include your Member ID and remember to correct any details about your contact information that may have changed.

Member ID _____ Phone _____

Name(s) _____

Address _____

Email _____

Subscription amount

Regular \$25 (individual or family), Overseas \$30, full time Student \$13.

Donations welcome

Total enclosed

Payment Options

Internet Banking:

Account Number: **12 3059 0283520 00**
Account Name: **Supporters of Tiritiri Matangi**
Particulars: **Membership**
Code: **Full Name**
Reference: **Member ID**

Cheque:

This option is no longer available

Credit card:

Visa

Mastercard

Card number: ___ / ___ / ___ / ___

Expiry Date __ / __

Name on card _____

CSC No
(three digit number from back of card)

Please send the completed form with payment / payment information to:

Membership Secretary, Supporters of Tiritiri Matangi Inc,
PO Box 90 814, Victoria Street West, Auckland 1142

Or scan and email to membership@tiritirimatangi.org.nz