



Membership Application

One application per household

I /we wish to become a member of the Friends of Pukekura Park New Plymouth Incorporated

Please write your First and Family name as you would like to see it on your name badge

Primary name for correspondence:

Name 2:.....

Name 3:.....

Postal Address:.....

.....

Primary e-mail for correspondence:

Home phone:.....

Primary Work phone:.....

Strengths and skills which I / we could bring to the Friends:

.....

.....

I enclose a cheque / cash for Membership: \$15.00

Donations to the Friends are greatly appreciated

Total amount enclosed: \$.....

Signed: Date:

We hope you will enjoy your association with Pukekura Park and the Friends.
Thank you for joining.