

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:

***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

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: