

**Tukino Alpine Sports Club
Membership Application Form**

Full Name _____ **Nationality** _____

Date of birth (d/m/y) _____ **Gender** (circle) M F

Mailing Address _____

Email _____

Phone (mob) _____ (home) _____ (work) _____

Emergency contacts:

(name) _____ (phone) _____ (relationship) _____

(name) _____ (phone) _____ (relationship) _____

Vehicle type (circle - this is helpful for us to know re vehicle access)

Heavy duty 4x4 SUV 4wd car (e.g. Subaru) Car

Interests

Skiing Ski touring Snowboarding Ice Climbing
Mountaineering / tramping Rock Climbing Mountain biking
Other: _____

Membership type

Annual Adult (\$70)
Annual Student/Child (\$50)
5 Year Foundation Individual (\$320)
5 Year Foundation Individual including guests (\$2000)
Life Foundation including guests (\$5000)

Parental consent required for student and child applications:

Parent Name: _____ Parent signature: _____

How did you hear about us?

Internet search
Word of mouth
NZ Alpine Club
Brochure/poster
Other: _____

Do you belong to other outdoor clubs? (name) _____

Have you visited us before? And if so, when? _____

Privacy Statement: Information on this form is for used for Tukino Alpine Sport Club purposes only.

SEND SCANNED APPLICATION FORM TO:

membership@tukinoalpinesportsclub.org.nz

OR SEND BY POST TO: Memberships, Tukino Alpine Sports Club, C/O 248
Rintoul Street, Berhampore, Wellington 6023

For office use: Membership confirmed? Database updated: Welcome email sent:

Start Date: _____ End Date: _____