

## Membership Form

ROYAL OVER-SEAS LEAGUE NEW ZEALAND

Title: \_\_\_\_\_ First name: \_\_\_\_\_ Surname: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
\_\_\_\_\_

Telephone number: (    ) \_\_\_\_\_ Post code: \_\_\_\_\_

Email address: \_\_\_\_\_ Date: \_\_\_\_\_

*Payment \$60 per person*

*Please tick (✓) your method of payment*

- ☐ **Account transfer:** to bank account 02 0108 0112629 00  
Payee particulars – your full name  
Code – ‘new’  
email form to: [ROSL4NZ@gmail.com](mailto:ROSL4NZ@gmail.com)
- ☐ **Cheque:** make payable to ‘Royal Over-Seas League’  
**Mail to** ROSLNZ  
PO Box 508  
Wanaka 9343

*How did you hear about us?*

- ☐ word of mouth                      ☐ website                      ☐ ROSLNZ event  
☐ am existing member              ☐ other

*Membership number and card will be sent on receipt of payment*