



FERRYMEAD PRINTING SOCIETY

Ferrymead Heritage Park, Christchurch
www.ferrymeadprint.org.nz

Membership Application Form 2019 (After 1 Oct)

Name: _____

Address: _____

Phone: (home) _____ (mobile) _____

Email: _____

Type of Membership: ☐ Full \$30 \$15 ☐ Junior \$30 \$15 ☐ Business \$60

Declaration: I support the Objectives of the Society and agree to abide by their Constitution.

Signed _____ Date: _____

Signed by Parent/Guardian if under 15 years of age _____

☐ Paid in cash ☐ Paid by cheque

☐ I will pay online to Ferrymead Printing Society, Account number 03 0830 0338510-01

Please include your name, using Subs2019 as the reference and to confirm your payment, please email: admin@ferrymeadprint.org.nz

Welcome to the Society!



Office Use: ☐ Copy to Secretary ☐ Copy to President