



New Zealand Federation of Business and Professional Women Incorporated
Affiliated with the International Federation of Business & Professional Women

P O Box 28 326 Remuera, Auckland 1541, New Zealand
Email: president@bpwnz.org.nz
www.bpwnz.org.nz

Application for Individual Membership

Name _____

Address _____

Occupation _____

Home Phone: _____

Work Phone : _____ (land line please)

Mobile: _____ Fax: _____

Email: _____

If you are aged 18-35 years, would you also like to register for the Young BPW Network at no extra cost? Yes No

Annual Individual Membership Subscription enclosed, payable to "BPW NZ" = \$ 65.00

Applicant Signature: _____ **Date:** _____

Please return your application and cheque to :
The Executive Secretary, BPW NZ, PO Box 28 326, Remuera, Auckland 1541

As an Individual Member you are entitled to receive electronic copies of our monthly Newsletter and from time to time other information about our activities.

Do you consent to receive this information? Yes No

For more information about BPW and what we do, please go to our web site
www.bpwnz.org.nz

NB: Information gathered on this form is used solely for BPW purposes. Membership details are not divulged to third parties without the prior consent of the member.