NEW ZEALAND MODEL AERONAUTICAL ASSOCIATION (INC)
AFFILIATION FORM

THIS FORM MUST BE COMPLETED IN FULL BY EACH APPLICANT (NEW MEMBER)

CLUB NO: _____ CLUB: _____

A APPLICANT'S DETAILS **NZMAA No: _____ (If previous membership lapsed)**

NAME: Mr, Mrs, Ms _____
(DELETE TWO) (INITIALS) (SURNAME)

ADDRESS: _____

_____

_____ **POST CODE:** _____
(THREE LINES MAXIMUM)

E-Mail Address _____

DATE OF BIRTH: _____ **OCCUPATION:** _____
(REQUIREMENT OF INCORPORATED SOCIETIES)

B SUBSCRIPTION CATEGORY: (TICK ONE ONLY)

	SENIOR	B1 ☐
	JUNIOR	B2 ☐
(IF YOU PAY THE FAMILY SUBSCRIPTION)	FAMILY (PAID)	B3 ☐
(IF YOU ARE INCLUDED IN A FAMILY MEMBERSHIP)	FAMILY (INCLUDED)	B4 ☐
	LIFE (NZMAA)	B5 ☐
	SPECIAL	B6 ☐

C FLYING CATEGORY: (TICK ONE ONLY)

	SENIOR	C1 ☐
(MUST BE UNDER 18 YEARS OF AGE)	JUNIOR	C2 ☐

D FLYING INTEREST REGISTRATION:
Indicate by placing a tick in the box(es) below, ***ALL YOUR FLYING INTERESTS***

Free Flight	1 ☐	Soaring R/C	6 ☐	F/F & C/L Scale	10 ☐
Control Line	2 ☐	Vintage	7 ☐	ScaleAerobatics	11 ☐
R/C Scale	3 ☐	Helicopter	8 ☐	Sport Flying	12 ☐
Aerobatics R/C	4 ☐	Pylon	9 ☐	Electric	13 ☐
Rally Flying	5 ☐				

E PERSONAL INFORMATION PRIVACY ACT 1993

In accordance with the Privacy Act 1993; I authorise the NZMAA to use such personal information as listed on the membership form for the purpose of planning and promoting NZMAA activities, communicating information to me concerning my membership responsibilities and/or listed interests, publishing competition results, mailing of the Association's Official Publication, providing general statistical information to approved organisations and any other lawful purpose relating to membership of the NZMAA.

Signed _____ Dated _____