



**Maritime Archaeological Association of New Zealand Inc.**

P O Box 23 233, WELLINGTON CENTRAL

[www.maanz.wellington.co.nz](http://www.maanz.wellington.co.nz)

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## MEMBERSHIP APPLICATION FORM

**I hereby apply to become a member/renew my membership of MAANZ and agree to abide by the MAANZ Constitution and Principles and any by-laws or regulations made there-under.**

Surname .....

First Name .....

Address .....

Telephone Home ..... Work..... Mobile.....  
Fax .....

E-Mail .....

Diver  Non Diver

Diver Qualifications .....

Other Relevant Qualifications and Interests .....

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Fee for Financial Year from 1 July to 30 June \$25.00

Fee for Students / Unwaged \$10.00

Donations

**Pay on line to account 11 7220 0292713 11 with a name as an identifier**

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Application received by Secretary .....

Payment received by Treasurer .....

Receipt Number ..... Receipt Sent .....