

## APPLICATION FOR MEMBERSHIP OF U3A Wellington City

I/We wish to apply for membership of U3A Wellington City for the period 1 July 2023 to 30 June 2024 and confirm I/we are not in full-time employment.

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### Your contact details:

**Member 1** Title: Mr, Mrs, Ms, Miss. Prof, Dr, (other) \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Mailing address (including postcode):  
\_\_\_\_\_  
\_\_\_\_\_

**Member 2 (if applicable)** Title: Mr, Mrs, Ms, Miss. Prof, Dr, (other) \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Mailing address (including postcode):  
\_\_\_\_\_  
\_\_\_\_\_

*All U3A correspondence, newsletters, weekly lecture updates and event information is sent via email. If you do not supply an email address, a hard copy of the newsletter **only** can be mailed on request.*

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### Payment details: (please tick one):

\$40.00 (Single)

\$80.00 (Double)

Payment to be made to U3A Wellington City, account number 03-1540-0009019-01 with your name and SUBS as reference, by one of the following methods (please tick the relevant box):

by internet banking

by teller-assisted bank deposit

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**Thank you for completing your application.** Please make your payment, as indicated above, then EITHER

- scan the form and email to: **membership@u3awellingtoncity.org.nz**
- OR mail to: **c/o The President, 43 Calcutta Street, Khandallah, Wellington 6035**