## WAIKATO-BAY OF PLENTY MASTERS ATHLETICS Inc

## MEMBERSHIP FORM FOR YEAR – 1 SEPTEMBER 2024 – 31 AUGUST 2025

Please forward to	: Secretary	Fay Riley	37 Pillans Road Otumoetai TAURANGA 3		
Participating Member \$50.00 (NZMA) \$15.00 (WBOP Master			ANZ Competitive member - <u>\$15.00</u>		
TOTAL Or	\$65.00				
Social Member \$20.00 (NZMA) \$15.00 (WBOP Masters					
TOTAL	\$35.00				
Please fill in details	for upgrading of our rec	cords and retur	n with your paymen	t.	
Surname:		First Name:			
Address:		Phone:			
		Mobile:			
Post Code:		Date of Birth	:		
Email:		pleas	se print clearly	Male/Female	
Club (if any)					
IMPORTANT re ou	r UPFRONT MAGAZI	NE –			
•	· Upfront to be – Emails	ed to you?	Yes No		
Or I would rather have my Upfront posted to m		ie	Yes No		
NAME:	ADD	RESS:			
I confirm that the I Certificate.	Date of Birth stated ab	ove is that of	my Passport / Drive	ers Licence / Birth	
Signed:		Dated	l:		
	nilable – Important – ple milton East Hamilton 0314-0224525- 00	ease include yo	our name. Thanks		
Surname:		First 1	First name:		