

Please provide copies of the sources of the information relied upon in this application:

(Please Tick)

- Passenger list of the vessel of arrival – this is our preferred verification; or
- Other documentation such as NZ birth certificate, death certificate or marriage certificate that provides proof of arrival prior to 31 December 1865; or
- A NZ executed will or land transfer showing proof of arrival prior to 31 December 1865
- A direct Descendancy Family Tree

Privacy Act

Please strike out if you do not consent:

I consent to my name being published in any of the Society's official information channels. E.g., websites, publications etc.

I understand and agree that information I have supplied may be made available to any person who is considered by the Society to have a genuine interest in researching records relating to me and my ancestors.

I consent to becoming a member of NZ Founders Society Inc. and I am applying for membership of the _____ Branch

In the Membership category of (please tick):

- Ordinary Adult (over 18 years) Branch membership fees apply.
- Junior (under 18 years) no fee
- Associate (Related to a member but not personally eligible as a full member) Branch membership fees apply.

Signed: _____ Dated: ____/____/____

Office Use Only:

Verified by _____ of _____ Branch on ____/____/____

Certificate # _____ issued and verified by _____ on ____/____/____

NEW ZEALAND FOUNDERS SOCIETY INC.

Web: www.nzfounders.org.nz



Please send your application form to the Branch which you seek membership as listed on our website. Membership fees are payable to the applicable Branch.

APPLICATION FOR ASSOCIATE MEMBERSHIP

Full Name of Applicant:	Mr / Mrs / Miss / Ms		
Current Address (incl post code):			
Email:			
Contact Telephone:			
Occupation:		Date of Birth:	
Name of Eligible Member, please state their name and their membership number:			
			#

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I understand and agree that information I have supplied may be made available to any person who is considered by the Society to have a genuine interest in researching records relating to me and my ancestors.

I consent to becoming an Associate Member of the NZ Founders Society Inc. and I am applying for membership of the _____ Branch,

in the Membership category of Associate (related to a member but not personally eligible as a full member) Branch membership fees apply.

Signed: _____ Dated: ____/____/____

Proof to support application: please supply proof of your relationship to the Eligible Member through whom you are applying.

Office Use Only:

Verified by _____ of _____ Branch on ____/____/____

Certificate # _____ issued and verified by _____ on ____/____/____