

**GREY POWER THAMES
MEMBERSHIP APPLICATION FORM**

I wish to apply for membership of Grey Power Thames Association Incorporated

Surname:.....Preferred first name.....Mr/Mrs/Ms/Miss.

Wife/husband/partner.....

Postal address:.....

Phone:.....Mobile.....Email:.....

Birthdate month & year (optional).....

Current occupation.....OR if retired, prior occupation.....(optional)

I DO / DO NOT wish to receive promotional material. (please circle your preference)

Subscription Single: \$15 Couple: \$25

Your subscription can be paid by cash at the bank or internet banking to Grey Power Thames Westpac account 03 04580022957 00. Please include your full name as the reference.

As payments are processed a Grey Power membership card and receipt will be sent to you.

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**Please forward this application form to: The Secretary, Grey Power Thames,
303 Kauaeranga Valley Road, RD2, Thames, 3577. Email: barry.carolyn@xtra.co.nz Ph 7 8686353**