

THE PINNACLE SKI CLUB (INC) MEMBERSHIP APPLICATION

Please provide a separate form for each person applying, unless you are applying for Family Membership (then simply fill out page 2 as well). Applications are only read by the PSC Committee. By becoming a PSC Member, you agree to abide by the PSC Health & Safety Policy available on our Website*. Your participation is much appreciated.

First Name _____ Last Name _____

Date of Birth ____/____/____ Occupation _____

Address _____

Suburb _____ City _____ Post Code _____

Home _____ Mobile _____

E-mail _____ How did you find out about PSC? _____

Emergency Contact Name and Phone Number _____

Please select from the following options...

Joining Fee	Cost	Please tick
Junior Member (<i>up to 17 yrs.</i>)	\$50	
Senior Member or other (<i>18 yrs. and over</i>)	\$100	
Membership Type		
Junior Member (<i>up to 17 yrs.</i>)	\$100	
Student Member (<i>must attach proof of full time enrolment at tertiary institution</i>)	\$100	
Senior Member (<i>18 yrs. and over</i>)	\$280	
Family Membership (<i>Please see Note 1</i>)	\$640	
Corporate Membership (<i>Please see Note 2</i>)	\$1,150	
Locker Rental	\$60	
Debenture (<i>Please see Note 3</i>)	\$50	✓

TOTAL FEES PAYABLE direct to ANZ Account 06 0101 0074981 00 \$ _____

* www.pinnacleskiclub.co.nz

- **Note 1: Family will consist of parent/dependants living at home not in full time work and will be offered at the discretion of the Committee.**
- **Note 2: Applications for Corporate Membership must be signed by the Applicant and two current Senior Members or Corporate Members. The Committee will vote at the next scheduled meeting on whether the Corporate Membership be approved or declined.**
- **Note 3: Every person who applies for Club Membership is required as a precondition of admission to lend to the Club \$50 interest free for the duration of their membership. It is repaid when membership ceases, though the Committee is entitled to deduct any moneys owing to the Club from the Debenture.**

THE PINNACLE SKI CLUB (INC) Additional applicant details for Family Membership

First Name _____ Last Name _____

Date of Birth ____ / ____ / ____ Occupation _____

Mobile _____

E-mail _____

First Name _____ Last Name _____

Date of Birth ____ / ____ / ____ Occupation _____

Mobile _____

E-mail _____

First Name _____ Last Name _____

Date of Birth ____ / ____ / ____ Occupation _____

Mobile _____

E-mail _____

First Name _____ Last Name _____

Date of Birth ____ / ____ / ____ Occupation _____

Mobile _____

E-mail _____

First Name _____ Last Name _____

Date of Birth ____ / ____ / ____ Occupation _____

Mobile _____

E-mail _____