



Association franco-néo-zélandaise
pour une éducation bilingue
French-New Zealand Association for
a bilingual education

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MEMBERSHIP APPLICATION FORM / BULLETIN D'ADHESION

Name: Forename:
(Nom) (Prénom)

Occupation:
(Profession)

Address:
(Adresse)

.....

Phone: E-mail:
(Téléphone)

Child(ren)'s name(s) / *Nom(s) de(s) l'enfant(s)*: Date of birth / *Date de naissance* :

1. 1.

2. 2.

3. 3.

I wish to apply to become a member of *Frenz School Inc*, and undertake to follow the rules of the Society. Please find enclosed \$20 which represents the annual membership fee.
(*Je désire devenir membre de Frenz School Inc, et je m'engage à suivre le règlement de l'Association. Veuillez trouver ci-joint mon règlement de \$20 qui représente la cotisation annuelle.*)

Date: Signature:
(Date) (Signature)

New Zealand Privacy Act

The Privacy Act 1993 provides that before we can circulate your name, address and any other details amongst members or to any other party, you must give consent under New Zealand law. If you wish to have your personal particulars EXCLUDED from any circulation, please tick the box:

The information may only be accessed by full members of *Frenz School Inc* and you have the right to inspect and update the details at any time.

Office use only: Email Member's list MYOB Date: