



**APPLICATION FOR CHAPTER MEMBERSHIP**

(Please note that you must first be a member of ASIS International)

Name: .....

ASIS International Membership Number:.....

Postal Address: .....

.....

Physical Address: .....

.....

Place of Work: .....

Phone: H ..... W .....

Fax: .....

Email: .....

Dated: ..... Signed: .....

**Payment Options**

Cheque. Enclosed is my Cheque for NZ\$92.00 in favour of ASIS New Zealand Inc.  
(Please ensure your ASIS Member Number is written of the reverse of the cheque)

Please debit my:     Mastercard         Visa

Card No.

Cardholder Name: .....

Expiry Date:     with the sum of NZ\$92.00

Signature: .....

ASIS New Zealand Inc.  
PO Box 21 757  
Henderson  
AUCKLAND