

Application form to join The Trump New Zealand Party



Member's details:

Full name	
Residential street address Suburb, Town, City or Locality (Not a PO Box Address)	
Date of birth	
Telephone number/s	
Email address	

Enrolment details:

I am a registered elector	YES / NO
Enrolled in _____ electorate	
<i>Complete if you are not a registered elector</i>	YES / NO
I am not a registered elector but i am eligible to enrol	
<p>You are eligible to enrol if you are a New Zealand citizen or permanent resident of New Zealand, 18 years or older And have resided in New Zealand continuously for one year or more and are not a disqualified from enrolling. Contact The Electoral Commission if you are unsure whether you are eligible to enrol.</p>	
<p>I am eligible to enrol as a New Zealand parliamentary elector as I am a (select one):</p> <p><input type="checkbox"/> New Zealand citizen</p> <p><input type="checkbox"/> Permanent resident of New Zealand</p> <p><input type="checkbox"/> Other - please specify: _____</p>	
<p>And I have lived continuously in New Zealand for _____ years _____ months</p>	
<p>If you live overseas provide the date last in New Zealand ____ / ____ / ____</p>	

Membership details:

I enclose / have paid my membership fee of \$2.00 for a 1 year membership with this application.
I authorise The Trump New Zealand Party to record my name as a financial member of The Trump New Zealand Party
I authorise the secretary of The Trump New Zealand Party to release this application form and Subsequent financial membership details to the Electoral Commissions for the purposes of The Trump New Zealand Party registration under the Electoral Act 1993.

Signed _____
(Signature of person applying)

Date _____