

■ **Please note:** apprentices working for MasterLink host businesses will be automatically enrolled for FREE membership. You do not need to complete this form if this applies to you.



APPRENTICE MEMBERSHIP

PERSONAL DETAILS

Name: _____
First Name Last Name

Date of Birth: _____
dd/mm/yyyy

CONTACT DETAILS

Postal Address: _____

Town/City Postcode

Email: _____

Phone: _____

Mobile: _____

ABOUT YOUR APPRENTICESHIP

Trade Studying: Plumbing Gasfitting Drainlaying Tick all boxes that apply.

Limited Certificate authorisation number: _____

Date started apprenticeship: _____
dd/mm/yyyy

Currently Employed? Yes No If yes, please include company details below.

Company Name: _____

Company Address: _____

TERMS & CONDITIONS

I agree:

1. that the information supplied here is true and correct to the best of my knowledge
2. to the Rules of Master Plumbers, Gasfitters & Drainlayers NZ (available on request); to the Society's Code of Practice and Code of Conduct (available on request); and to any amendments adopted in accordance with the Rules of the Society
3. that Master Plumbers, Gasfitters & Drainlayers NZ may terminate my membership immediately in accordance to the Rules of Society

Applicant Name: _____ Date: _____

NEXT STEPS

Send your completed application form to Steve Rushworth via email: srushworth@masterplumbers.org.nz or post to:

Master Plumbers, Gasfitters & Drainlayers NZ
PO Box 6606
Marion Square
Wellington 6141

You will then be invoiced for the membership fee of \$40.00 and a receipt issued.