*Once completed please return this form to NOHANZ, preferably via email:* *membershipnohanz@oralhistory.org.nz* *OR post to NOHANZ, PO Box 3819, Wellington 6140.*

Date: …………………….......

I/We wish to JOIN NOHANZ

Name: ……………………...............................................................................................

Name of institution or organisation (if relevant): ……………………………………………………………..

Postal address: ………………………………………………………………………………..

…………………………………………………………………………………………………..

Phone number (Home): ………………………………. (Work): …………………………...

(Mobile): ………………………………………………………………………………………..

Email address: ………………………………………………………………………………...

How did you hear about NOHANZ?

 through a friend or colleague

 at a national conference or regional meeting (please detail) …………………….….

 through oral history training (please state name of provider): …………………….….

 through the NOHANZ website or search engine (please detail): …………………….

 other (please detail): ……………………………………………………………..……….

**SUBSCRIPTION RATES**

**$60** general members | **$90** for institutional members | **$40** students/unwaged

**PAYMENT - Internet banking**

You may pay by internet banking whether you email or post in your application form.

Account number: 02-0568-0405836-00

Account name: NATIONAL ORAL HISTORY ASSN OF NZ

Please ensure your/member’s NAME appears as a reference

NOTES:

1. NOHANZ is not GST registered so GST is not included in the subscription and should not be added.
2. The subscription year runs from 1 July to 30 June
3. Subscriptions for new members who join after 1 April in any year will be credited to the next financial year.
4. Under the NOHANZ Constitution, membership is deemed to have lapsed if a subscription is unpaid 6 months after it falls due.
5. NOHANZ does not sell or give its address list to other organisations, nor share information within NOHANZ without seeking permission.