

MEMBERSHIP APPLICATION

I,being a member of the S+SNZ, do hereby a for membership of the Consulting Surveyors of New Zealand, a division of the S+SNZ in accord with Rule 6 and to have my name included in the List of Members.	
I fulfil the following criteria for membership (please tick appropriate box).	
a) In private practice on my own account:	
b) In partnership with other members of the Institute and/or members of other professions:	
c) Director of a company offering surveying and spatial services in accordance with the rules of the Institute:	
d) Shareholder, with full voting rights of a company offering surveying and spatial services in accordance with the rules of the Institute:	
e) In charge of a branch office or operating division of my employer¹:	
I undertake to comply with the Rules and Bylaws of the Division at present and hereafter in for and also to do what lies in my power to further the interests of the Consulting Surveyors of No Zealand.	
Signature: Date:	•••••
Name of Practice:	
Address	
Telephone: Bus Home	
MobileEmail:	· · · · · · ·
Names of other Principals:	
Signature of members nominating under section 6.01 e:	
	•••••
Send to:	
Wendy Sheedy, Secretary at csnz@surveyspatialnz.org , or	

This will then be presented to the CSNZ Management Committee for approval.

P O Box 41064, Lower Hutt, Wellington 5013.

¹ An application under this criterion is to be accompanied by a short biography and proof of eligibility (i.e. job description). The application and biography will then be sent to the CSNZ secretary along with nomination from two current CSNZ members. The two members who are nominating should sign this form.