



Long Bay Residents' Association

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To The Secretary
Long Bay Residents' Association Incorporated
45 Te Oneroa Way
Long Bay
Auckland 0630

MEMBERSHIP APPLICATION FORM

I wish to become a member of the Long Bay Residents' Association Incorporated.

Name: _____

Postal Address: _____

Email Address: _____

Phone Number: _____ Mobile: _____

Please select one: Owner Occupier*

The membership fee for the Long Bay Residents' Association has been set by our members at \$20.00 per person per year.

Fees are payable into the Long Bay Residents' Association bank account number:

ASB Browns Bay - 12 3059 0030830 000

Please give your full name as a reference for this transaction. A receipt for your membership fee is available on request.

I agree to abide by the rules of Long Bay Residents' Association Incorporated, to pay the levies charged to members when due, and to the Association holding the above details on their records.

Signature: _____ Date: _____

*Note before an application for membership from an occupier is accepted the Association may require details of the tenancy.