Please fill in the following details and return the form to [membership@mensa.org.nz](mailto:membership@mensa.org.nz).

*Note as this is a Word document the table cells can expand as needed*

|  |  |
| --- | --- |
| First name |  |
| Last name |  |
| *Preferred name* |  |
| *Name of Parent or Guardian if under 18* |  |
| Postal address |  |
| Personal email |  |
| Secondary email *(or parent/guardian email if under 18)* |  |
| Phone number |  |
| Date of Birth dd-mmm-yyyy |  |
| Gender |  |
| Membership ID number if known |  |
| Preferred subscription option –  **1 Year** – Adult, $45; Concession (Retired, U18, Student\*, Unwaged\*), $30  **3 Years** – Adult, $120; Concession (Retired, U18, Student\*), $80  *\***valid ID/proof of entitlement required* |  |
| Signature *(typed is fine)* |  |