

**Nelson A. & P. Association**

PO Box 3062

Richmond 7050

03 544 7181

Email: manager@richmondpark.nz<http://www.richmondpark.nz>**20 & 21 November**Richmond Park Showgrounds
358 Lower Queen Street, Richmond**NELSON A. & P. ASSOCIATION MEMBERSHIP FORM 2021****Please select one of the following options:****Name(s)**.....*(Name & Membership Number if this is a membership cancellation – no other details required)***Address**.....**Post Code**..... **Phone**..... **Email**.....**Signature**..... **Dated**.....**New Members Declaration:**

I wish to become a member of The Nelson Agricultural & Pastoral Association and undertake to pay annually future subscriptions in accordance with the rules. I understand that I am liable for all subscriptions until such time as the Nelson A & P Association receive my resignation in writing.

<u>Membership Type</u>	<u>Cost</u>	<u>Show Passes</u>	<u>Tick one or write 'change to' if changing Membership type</u>
Individual Membership	\$25	1 x Weekend Adult pass	
Partner Membership	\$35	2 x Weekend Adult passes	
Family Membership	\$25	1 x Weekend Family pass	
Competitive Membership	\$45	10 x Day Competitor passes	
Corporate Membership	\$60	6 x Weekend Adult passes	
		Membership Cancellation	

Voluntary Donation \$ _____ (any donation is appreciated).

Note: Adults are 17 years & over / Family is 2 Adults + up to 3 Children (under 17 years)

Total Amount: \$ _____

Please tick if tax invoice/receipt is required:

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*****If this is NOT a new membership application or if there is no increase in cost due to a change in membership type only pay the amount specified on your membership invoice.*****

Return to: Nelson A. & P. Association, P.O. Box 3062, Richmond, 7050or Email: manager@richmondpark.nz**Office Use:**

Amount Received: _____

Date: _____

Membership Number: _____