



NEW ZEALAND RESOURCE TEACHERS LEARNING BEHAVIOUR ASSOCIATION

NEW MEMBER APPLICATION FORM
Application & Invoice For NZRTLBA Association Membership 2009
(GST NO: 60 - 076 - 030)

PLEASE FILL IN ONE FORM PER RTLBA & RETURN TO:

Robyn James
NZRTLBA ASSOCIATION TREASURER
P.O. Box 43
WAIPAWA 4240
CENTRAL HAWKES BAY
email: treasurer@nzrtlb.org.nz

NAME: _____ Newly appointed Y/N. Full Time/Job Share -%

Is this a new appointed position? **Yes/No** Is this a relieving position? **Yes/No**
If yes, relieving for whom? _____

I am employed as RTLBA/ RTLBA Maori. I am a New Zealand Registered Teacher Yes/No

EMPLOYER SCHOOL: _____ **FUNDHOLDERSCHOOL:** _____

Address: _____ Postcode _____

Mailing Address: _____ Postcode _____
(if different to physical location)

Work Phone: _____ Work Fax: _____ Mobile: _____

Email: _____

REGION : Auckland Central Auckland North Auckland South Auckland West
(Please circle)
Canterbury Hawkes Bay Te Ara Haunui Otago Southland
Tai Tokerau Tairāwhiti Taranaki Tasman Wairariki Waikato Wellington

CLUSTER: _____

I understand that the NZRTLBA Association is governed by the rules that have been adopted into the NZRTLBA Constitution. A copy of the constitution is available from your Regional Coordinator or from the website.

To ensure NZRTLBA Association Members full voting rights, full subscription of \$75.00 is required for each RTLBA, including those RTLBA in a shared position.

I enclose \$75.00 as the subscription fee for the school year 2009 Yes/No
Please make cheque payable to: NZRTLBA ASSOCIATION and send the cheque, with this form, to the NZRTLBA Association Treasurer at the above address.

Early association membership payment will entitle members to a reduction in fees for the annual NZRTLBA Conference

DATE:..... SIGNATURE:.....

Office use

Application Approved: Treasurer..... Date.....

Entered on to data base Received.....