

New Zealand Membership Application



Mr. Mrs. Ms. Other: _____ Date of Birth (DD/MM/YYYY)*: _____
 First Name: _____ Last Name: _____ Designations: _____
 Company Name: _____ Job Title: _____
 Company Mailing Address: _____
 City / State/Province / Postal Code: _____
 Country: _____ Work Phone: _____ Mobile: _____
 E-mail: _____ Company Website: _____
 How did you hear about us? Website Attended an event E-mail Other: _____
 Were you referred by a friend or colleague? (Name): _____

Section A: Membership Information

Membership Type	Jan - Dec
End User/Service Provider/Economic Developer	NZD \$680
Young Leader*	NZD \$240
Student**	NZD \$25
Academic, Journalist, Retired †	NZD \$130

- Memberships run on a **calendar year**. The first year you join we prorate the membership based on the month you join. Memberships purchased 1 July or later will include membership for the remainder of the current year and the following calendar year. Visit [Join Now](#) for **current rates**.
- Select your membership type based on your duties within your organization. Visit [Membership Categories](#) for detailed membership descriptions and requirements.
 - * Young Leader applies to those 35 years of age and younger. Must submit proof of age (Driver's License or Passport)
 - ** Student Members must be full-time or active degree candidates in real estate or related fields. Student members must present current transcript and copy of student ID.
 - † Retired members must have had an active membership for five years prior.

Section B: Affiliations:

Please indicate at least one (1) Chapter affiliate, (included in the cost of your membership). You may choose additional Chapter affiliations; each additional affiliation will incur a cost of NZD \$50 (each). Monies go directly to the affiliate(s) indicated.

1st Affiliate _____ (included)
 2nd Affiliate _____
 3rd Affiliate _____
 Total _____

Visit [Chapters](#) for a complete list of Chapters.

Tell Us About Yourself:

Seniority:

- Senior Executive in my Company
 Mid-Level to Senior Executive
 Junior Level to Senior Executive

Responsibility:

- Global Regional Local

What I want from CoreNet Global:

- Professional Development Research
 Networking Awards

Years in Profession:

- 0-2 years 2-5 years 6-10 years 10+ years

Section C: Payment Information

Section A: Membership (NZD\$) _____
 Section B: Affiliations (NZD\$) _____
Amount Due (Sections A + B) (NZD\$) _____

Wire Transfer (see details below)

Credit Card: American Express MasterCard Visa

Credit Card Number: _____

Expiration Date: _____ Security Code: _____

Name on Card: _____

Signature: _____

Wire Transfer Details:

Westpac Account Name: CoreNet Global, Inc. Account No.: 38 9019 0705642 00

IMPORTANT: Please include the following with payment: Particulars: Company; Code: Member's Name; Reference: Invoice number (if applicable)

I hereby apply for membership in CoreNet Global. I agree that if accepted, I have read and will abide by the [Association's Bylaws](#), support its objectives and pay the dues established by the Board of Directors for my category of membership. I understand that membership in CoreNet Global is individual non-cancellable and non-transferable. **No refund will be payable for any unused portion.** I agree to the use of photos, videos and testimonials of and by me for promotional purposes. I understand that by submitting this application, I am subscribed to CoreNet Global e-mail communications. A portion of your membership fee is designated as the annual rate for the LEADER magazine.

Applicant's Signature: _____ Date: _____

Please remit to: CoreNet Global

133 Peachtree Street NE, Suite 3000 • Atlanta, Georgia 30303 • Fax: +1 404.589.3201 • membership@corenetglobal.org

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