

I hereby declare that I am entitled to membership of Lake Wanaka Tourism and will pay the appropriate amount either by: (please tick the appropriate category)

a) Subscription (\$545 pa)		
b) Rate payment		
c) Rate contribution throu	gh rent/lease	
Please register my membe	ership:	
TRADING NAME OF COM	MPANY:	•••••
REGISTERED COMPANY	NAME:	•••••
DESCRIPTION OF BUSIN	ESS:	•••••
POSTAL ADDRESS:		••••••
LOCATION OF BUSINESS	5: (if different from postal)	•••••
Telephone:	Mobile:	
PROPRIETOR NAME (Ow	vner)	•••••
Primary Contact (Owner	·) E-Mail:	•••••
Business Manager Conta	act Email (if different from above):	••••••
Accounts Contact E-Mai	l:	•••••
Website:		•••••
NOMINATED SPOKESPE	RSON (can vote & stand for the Executive)	
	at I have all the necessary consents and approvals to operate this bu premises including a complying Health & Safety Policy and that thes	
 I will notify Lake V fees up until the r 	Wanaka Tourism in writing if I wish to cancel my membership and winotification date.	ill pay all outstanding
	p please attach to this form either:	
,	es statement verifying your business as a commercial rate payer, or t or lease agreement verifying your contribution to the commercial	rate.
PROPRIETORS SIGNATU	RE: DATE:	
For Office Use		
Invoice Sent on:	Paid / Approved	
Membership List New Memb	ers List Website Email Lists – Members / Bed operators /Activity Operators	Approval Letter

VIN notified