



Website: www.ipps.org.nz

Application Form for Membership 2019

Mr/Mrs/Miss/Ms/Dr (Please Delete) Surname: _____

Preferred Name: _____ First Name(s): _____

Organisation: _____

Position: _____

Mail Preference: _____ (Enter **B** for Business or **H** for home – although most information is sent by email)

Bus. Address: _____

Home Address: _____

Post Code: _____

Post Code: _____

Bus Phone: _____

Home Phone: _____

Bus Fax: _____

Home Fax: _____

E-mail Address: _____

Mobile Phone: _____

Annual Subscription:

Basic Membership - 1 January to 31 December All prices include GST

Full year (January - December)	\$115.00
Half year (if joining after 1st June)	\$65.00

Student Membership – Please use the separate Application Form to apply for Student Membership available from the Secretary Glenys Evans, or on our website.

Payment: All applications must be accompanied by payment of one year's fees.
Should membership be declined, a full refund will be immediately returned.

Please Indicate Amount Paid: \$ _____

Bank account details: 02 0152 0411108 000

Please use your Name as the Reference

PROFESSIONAL INTERESTS – Please indicate your fields of interest.

(This information will be used to help members with particular interests to make contact with each other.)

- | | |
|---|---|
| A Advisory, Extension and Consultancy | B Bedding Plants |
| C Computers | D Propagation and Nursery Management |
| E Education | F Fruit Trees, Nuts, Vines |
| G Greenhouse Production | H Herbaceous Perennials and Alpines |
| I Irrigation, including mist and fog systems | J Container Production |
| K Field Production | L Liner Production |
| M Micro Propagation and Tissue Culture | N Nutrition and Soil Media |
| O Ornamental Shrubs, including evergreens | P Plant Breeding and Selection |
| Q Equipment Suppliers | R Research |
| S Seeds, Seedlings and Plug Production | T Trees, including forestry |
| U Climbing Plants | V Vegetative Propagation, including grafting |
| W Native Plants | X Xeriscape Plants (desert plants) |
| Y Marketing and Promotion | Z Plant Protection, including IPM |

Plant Interests (enter up to 3 plants): _____

Plant Production Experience and Employment History involving Plant Production:

My application for membership is supported by (an existing member):

If you require help with this please tick here as we can assist. Help needed.

Supported by: _____
(Name)

(Signature)

Privacy Act 1993 - Some of the information provided by you in this application form will be stored in IPPS files both in New Zealand and by the International Board. Furthermore your name and address along with your interests will appear in both the New Zealand and International Membership Directory. By signing this application form you are giving consent to such actions.

Applicants Signature: _____ Date: _____

Please return the completed application form, together with your subscription payment to:

**Glenys Evans
IPPS Secretary
P O Box 98
Waikanae 5250**

Phone 04 293 2501 Fax 04 293 5450 Email gus@gusevans.co.nz