



Website: [www.ipps.org.nz](http://www.ipps.org.nz)

## Application Form for Membership 2016

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:** (Please indicate which option you are applying for)

**Basic Membership** All prices include GST

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

**Plus Printed Proceedings** - Book or CD not available after 1st June

|   |          |
|---|----------|
| <b>Book</b> – add \$66.00 – total payable           | \$181.00 |
| <b>CD</b> – add 40.00 – total payable               | \$155.00 |
| <b>Book &amp; CD</b> – add \$106.00 – total payable | \$221.00 |

**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 00**

**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.)

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

**Plant Interests** (enter up to 3 plants): \_\_\_\_\_

**Other Interests:** \_\_\_\_\_

**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.

\_\_\_\_\_  
(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**