



## NZIEH Membership Application

Apply to become an NZIEH member, fill in the form below, and either email it to [info@nzieh.org.nz](mailto:info@nzieh.org.nz) or post your application to:

NZIEH Executive Director  
PO Box 12032  
Thorndon  
Wellington 6144

We will contact you within 7 days of receipt of your application, if you have not heard from us, please contact [info@nzieh.org.nz](mailto:info@nzieh.org.nz) to confirm your application has been received.

Membership is open to any person fulfilling the necessary membership grade requirements subject to approval of the Executive Director.

Title*	
First Name*	
Last Name*	
Street Address	
Suburb	
City	
Post Code	
Country	
Business Phone*	
Home Phone	
Mobile Phone	

Primary Email*	
Secondary Email*	
Job Title	
Current Employer / Place of Study*	

## Centre Affiliation

- Auckland
- Waikato / Bay of Plenty
- Central North Island
- Wellington
- Tasman
- Canterbury
- Otago / Southland

## Membership Grade\*

- Full Member
- Associate Member
- Student Member

Please describe any additional information regarding your skills and abilities that may be of relevance and/or value to the NZIEH administration.

Skills and abilities*	
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Tertiary Qualification(s) held*	
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## Tertiary Qualification included\*

A copy of all relevant tertiary qualifications must be included with the application