



Waitaki High School Old Boys' Association (Inc.)

Mailing Address: The Secretary, Private Bag 50057, Oamaru 9444
www.wbhsobai.co.nz

APPLICATION FOR MEMBERSHIP

PLEASE PRINT

I _____
(Full name please)

Of _____

_____ (Full Postal Address please)

hereby apply to become a member of the Waitaki High School Old Boys' Association (Inc).

I was a pupil of the school from _____ to _____

I wish to pay: (Please circle)

1. Annual Subscription payable on the 1st May each year, \$40.00c.
2. Life Member Subscription at \$250.00c.

Email Address: _____

Contact Phone Numbers - Home: _____ Cell _____ Work _____

SIGNED: _____ Dated: _____

Life Member payments can be made to:

For Life Member payment please send a cheque to the address above or pay into account Waitaki High School Old Boys' Assn. Inc. ANZ, Oamaru 060941 0020337 04.

For Annual payment please send a cheque to the address above or pay into account 060941 0020337 00
Please make sure you put your full name so I can identify your payment.

Please tick here if you are interested in a class reunion: What year: _____

Please indicate if you know the whereabouts and contact details for other ex-pupils: YES / NO

Please circle any of the following you are able to assist with:

Executive committee (meet every 3 months) - Fundraising - Organising reunions
Attending a branch meeting - working bees at the school - being a committee member