

# NAP membership

feel free to join us

First name:

Last name:

Address:

Date of birth (optional):

Telephone number/s:

Email:

Do you wish to receive Not A Party email?

Yes

No

Are you eligible for vote/not vote registration in New Zealand?

Yes

No

Electorate:

Which amount of fee would you prefer to pay?

\$1

\$6

\$60

\$600

\$1,000,000

Signed \_\_\_\_\_

Date \_\_\_\_\_