



MEMBERSHIP APPLICATION FORM

Name of company/organisation:	
Postal address:	Street address:
Telephone:	E-mail:
Facsimile:	Website:

Please provide details of contact person/people at your company/organisation.

Name:	Name:
Position:	Position:
Telephone:	Telephone:
Facsimile:	Facsimile:
Email:	Email:

The above information is for the Energy Federation of New Zealand (Inc) database records only and will not be available to any other party unless written permission is sought.

Please return by mail or email as an attachment to C.Gazo@crl.co.nz