



APPLICATION TO JOIN THE RENTAL VEHICLE ASSOCIATION

I, of.....
(Name) (Company name)

I apply to become an Associate Member of the Rental Vehicle Association NZ and undertake to be bound by the Rules of the Association, comply in full with the Association's Code of Conduct and to pay the Annual Subscription as determined each year.

| | |
|--------------------------|--|
| Company Name | |
| Main Contact Name | |
| Physical Address | |
| Street Number & Name | |
| Suburb | |
| City | |
| Post Code | |
| Postal Address | |
| PO Box | |
| City | |
| Post Code | |
| Telephone | |
| Fax | |
| Mobile | |
| Website | |
| Email | |

I agree to abide by the Rules of the New Zealand Vehicle Rental and Leasing Association Incorporated and any rule, regulation, bylaw, or code of behaviour that is issued in accordance with the Rules.

I understand that the benefits and services of membership will only be available to me while my membership is financial.

_____ /_____/_____
Print name *Position* *Date* *Signature*

Please advise the RVA if your contact details change at any time. Please note that formal resignation in writing is required for members to discontinue membership with the RVA. No refunds will be given on notice of resignation.

CONFIDENTIALITY:

The information on this form is being collected to enable the RVA to process your membership and carry out its role as a trade association in an efficient and effective manner. The RVA may and will only use information on this form for the provision of non-identifying statistical information, or for purposes consistent with or beneficial to the member's business.