

COLLEAGUE MEMBERSHIP



TYPE AND COMPLETE APPLICATION FORM BELOW. (NO HANDWRITTEN FORMS ACCEPTED).

PERSONAL DETAILS

Full Name: _____ Date of Birth: _____ Gender: _____

How did you hear about us? _____

Ethnicity: Māori European Pacific Island Asian Other

COMPANY CONTACT DETAILS

Company Name: _____ Position: _____

Postal Address: _____ Suburb: _____ City: _____ Postcode: _____

Physical Address: _____ Suburb: _____ City: _____ Postcode: _____

Website: _____

Email: _____ Phone: _____ Mobile: _____

PROFESSIONAL CONDUCT

Have you had any court convictions other than minor traffic infringements?

Have you had any claims for professional negligence, error or omission made against you and/or partners?

Are you aware of any such claims pending?

Have you ever been declared bankrupt?

Have you ever been a party named in association with an WHRS Claim?

Has your Company ever been in liquidation?

If you have answered YES to any of these questions please provide full details:

APPLICATION FEE A non-refundable application fee of \$50.00 + GST (\$57.50)

I have paid my application fee by direct credit

ADNZ account details account number 02-1278-0017004-00 (please provide your name as the reference)

DECLARATION

I, hereby apply for Colleague Membership of ADNZ.

I declare that the information submitted with this application is true and correct.

I am not a practicing designer or architect.

I have read, understood and agree to adhere to the ADNZ Code of Ethics and ADNZ Rules.

I agree that the decision of the ADNZ Board in regard to my application is final and there is no right of appeal.

I consent to my contact information being shared with ADNZ members and included in the 'Find a Designer' section on the ADNZ website.

I agree that I will not share or disclose other members' contact information without their consent and confirm that I will use reasonable care to safeguard against the accidental disclosure of such information.

Signed: _____

Date: _____

Typing your name here is accepted as a digital signature

Please email this completed application form to

MEMBERSHIP@ADNZ.ORG.NZ

Architectural Designers New Zealand Inc.

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Phone 03 358 0112, Email membership@adnz.org.nz



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