



## Membership Subscription Form

**I/We wish to become members of Oliveti**

Grove/Business Name/Label:

First Name:

Last Name:

Partner First Name:

Partner Last Name:

Home Phone No:

Mobile No:

e-mail Address1:

e-mail Address2:

*By providing your e-mail address you are confirming you are happy to receive e-mails from Oliveti to keep you informed on olive growing, processing, education and trends, seek support and/or advice of the membership on related questions you may have. Your e-mail address will remain confidential to Oliveti.*

Postal Address1:

Postal Address2:

Postal Address3:

Post Code:

Grove Address1:

Grove Address2:

Grove Address3:

Grove Post Code:

Number of trees in grove:

**Approx. Number of Trees by Cultivar:**

J5:    Ascolano:    Frantoio:    Leccino:    Koroneiki:    Pendolino:    Manzanilla:

Picual:    Chemali:    Other:

## **JOIN - Oliveti Northland Inc.**

**Annual Subscription: \$50.00** (One membership per household)

Please complete and return this form together with Cheque payment to:

**The Treasurer  
Oliveti Northland Inc.  
P.O. Box 1379  
WHANGAREI 0140**

Receipt Required: Yes / No

Or scan and e-mail to:  
**secretary@oliveti.co.nz**

Electronic Payment details:

**Bank Account Number: 12 3099 0666999 00**

*Please Include - First Name and Last Name in "Details"*

### **Use of contact details :**

"I have no objection to my name and address being published or circulated to other members of Oliveti to further the objects of Oliveti".

**Yes** (*You may publish or circulate to other Members*)

**No** (*Do not publish or circulate to other Members*)

*Please cross out that which does not apply*

\*Name:

\*Date:

\*Signature:

### **Any enquiries to:**

John Bishop – Chairperson Oliveti Northland

Email:

[info@oliveti.co.nz](mailto:info@oliveti.co.nz)

Website:

[www.Oliveti.co.nz](http://www.Oliveti.co.nz)