

100 Marathon Club – New Zealand

Application for Associate Membership

Full Name: _____

Mailing Address: _____

Date of Birth: _____

Contact phone No: _____ **Business phone No:** _____

Mobile phone No: _____

Email Address: _____

Fax no: _____

Current Athletic/Running Club: _____

I wish to apply for Associate Membership of the 100 Marathon Club – New Zealand.

Regarding this Application, I declare that I,

- 1) Believe that I am eligible to join the 100 Marathon Club – New Zealand, in accordance with the Criteria for Associate Membership.
- 2) Have completed a minimum of 60 (sixty) marathons which meet the Criteria for Associate Membership. A schedule of my completed marathons in the standard format of the Club is attached.
- 3) Believe that I will be able to achieve in future, an average of 5 (five) marathons completions annually. I also accept that if my Application is successful, I will, if requested by the Committee, provide details of my future marathon completions for review.

100 Marathon Club - New Zealand

- 4) Affirm my willingness to participate in, and contribute to the Club's activities, to the best of my abilities.
- 5) Undertake to apply for Membership of The Club within two calendar months of the date of achieving my 100th (one hundredth) marathon finish.
- 6) Am a permanent resident of New Zealand, and/or hold a New Zealand Passport at the date of my most recent marathon detailed on the schedule.
- 7) Consent, in terms of the Privacy Act, to the information provided in this Application being used by the 100 Marathon Club - New Zealand, for legitimate and reasonable Club related purposes only. I also consent to my mailing address and Contact Phone number (only) being made available to other Club members, on request, and for my name and/or photograph being published in Club communications from time to time.
- 8) Agree to pay the current Annual Subscription for my first calendar year of Associate Membership, the amount of which will be advised by the Club Committee.
- 9) Agree that if the Club levies an additional fee or annual subscription on Associate Members in order to sustain the continuance of The Club, then I will honour such levy and / or subscription, in order to maintain my membership.

Signed:

Date:

100 Marathon Club - New Zealand

Post the Application form/attachments to: Steve Tubbs,
100 Marathon Club - New Zealand,
Po Box 26120,
Newlands, Wellington. 6442

For: 100 Marathon Club - New Zealand use only:

Date Application received: _____

Date marathons verified: _____

Signed: _____

Date Application reviewed by Club Committee: _____

Date Application Accepted/declined: _____

Signed by two Club Committee members:] 1 _____ 2] _____

Date Applicant advised: _____

Method of communication: _____

By whom: _____