



William Glasser Institute-New Zealand

William Glasser Institute- New Zealand (Inc)

Membership Application and Subscription Tax Invoice

June 2011 – June 2012

PO Box 33-193, Petone, Lower Hutt 5046

CONTACT DETAILS (please print clearly)

Name:

Home address:

Home phone:

Work address:

Work phone:

Occupation:

e-mail address:

CURRENT TRAINING DETAILS

Level of training	Date completed	Location	Instructor/Supervisor
Basic Intensive Week		
Basic Practicum		
Advanced Intensive Week		
Advanced Practicum		
Certification		
Faculty		

MEMBERSHIP OPTION (Please tick one option)

- Associate Membership \$150 – this membership is for an organisation
- Individual Membership \$50 – this membership is for an individual

Please return this form with your payment and full details to the William Glasser Institute New Zealand (PO Box 33-193, Petone, Lower Hutt 5046), clearly marking the envelope "MEMBERSHIP".
Alternatively, you can make your payment electronically to the account of the 'William Glasser Institute (NZ) Inc', account number 060545 0336073 02 - giving your name as a reference. Then email your completed form to treasurer@glassernz.org.nz.

Confirmation and your membership number will be emailed to you.

Thank you