



Beach Haven Birkdale Residents Association

Membership to 31 March 20□□

Return this form via email to membership@beachhaven.org.nz

or post to P.O. Box 66 005 Beach Haven, Auckland 0749

Surname _____

First name(s) _____

Address _____

Phone (Work) _____ Phone (Home) _____

Phone (Mobile) _____ Email _____

Interests _____

Subscription \$ **10.00**

Donation \$ _____

Total Paid \$ _____ Cheque Cash Direct Debit

Payment by cheque to Beach Haven Birkdale Residents Association Inc. P.O. Box 66 005 Beach Haven, Auckland 0749

Or

Direct Debit to Bank Account at ASB Birkenhead 123035 0616562 00

Office use only

Received By _____

Received On □□/□□/20□□

Banked On □□/□□/20□□