



Annual Membership Form Year 2024/25

Upon completing this form, and on receipt of payment of the annual membership fee, you will become a member of Basketball Manawatu for a one-year period.

Full Name	
Address	
Phone Number	
Email	

Signed _____ Dated _____

Completed Membership forms must be returned with payment to Basketball Manawatu Office, CET Arena, 61 Pascal Street, Palmerston North OR via email gm@manawatu.basketball before the start of the Annual General Meeting.

.....
Official Use Only:

Payment received on Cash/Eftpos/Direct Deposit Receipt number
.....

Basketball Manawatu Incorporated
03-0726-0485166-01



Annual Membership Form Year 2024/25

Upon completing this form, and on receipt of payment of the annual membership fee, you will become a member of Basketball Manawatu for a one-year period.

Full Name	
Address	
Phone Number	
Email	

Signed _____ Dated _____

Completed Membership forms must be returned with payment to Basketball Manawatu Office, CET Arena, 61 Pascal Street, Palmerston North OR via email gm@manawatu.basketball before the start of the Annual General Meeting.

.....
Official Use Only:

Payment received on Cash/Eftpos/Direct Deposit Receipt number

Basketball Manawatu Incorporated
03-0726-0485166-01