

Democrats for social credit

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Democrats for Social Credit Membership Application/Renewal Form

I,.....
(**full** name required)

of.....
(**full** residential address required)

- confirm that I am eligible to enrol as a New Zealand parliamentary elector;
- enclose my annual membership fee of \$10.00 with this application form;
- authorise the Democrats for Social Credit Party to record my name as a financial member of the Democrats for Social Credit;
- authorise the secretary of the Democrats for Social Credit Party to release this application form and subsequent financial membership details to the Electoral Commission for the purposes of the Democrats for Social Credit Party registration under the Electoral Act 1993.

I am (*select one*):

- a New Zealand citizen; **or**
- a permanent resident of New Zealand; **or**
- Other – please specify: and I have lived continuously in New Zealand for years months.

Signed Date
(*Signature of applicant*)

PLEASE NOTE: The form above is required by the Electoral Commission. The information requested below is for DSC mail database use only.

Name:
.....

Postal address:
.....

Email address:
.....

Phone number/s:
.....

Thank you for your support.