



## FDANZ Business Partner & Affiliate Membership Application Form 2019/2020

Company Name: \_\_\_\_\_

Company Address (Physical): \_\_\_\_\_

\_\_\_\_\_

Company Address (Postal): \_\_\_\_\_

Manager name(s): \_\_\_\_\_

Phone Numbers: Business: (    ) \_\_\_\_\_

Mobile: (    ) \_\_\_\_\_

Email: \_\_\_\_\_

I/We apply to the Funeral Directors Association of New Zealand for:

- Affiliate membership -- \$850+gst
- Supporter Business Partner -- \$2,000+gst
- Major Business Partner -- \$5,000+gst
- Key Commercial Business Partner -- \$28,500+gst

Briefly describe your business and why being an affiliate member would be beneficial to the wider membership.

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name (Print): \_\_\_\_\_

**Funeral Directors Association of New Zealand (Inc)**

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Key Commercial Partner