UNIVERSITY OF AUCKLAND STAFF COMMON ROOM CLUB



APPLICATION FOR OTHERS MEMBERSHIP

| Staff ID number (if applicable): | Surname: |
|---|--|
| Forename: | Title: (Mr, Ms, Dr): |
| Home Address: | |
| | |
| Home phone / Mobile: Department / School (if applicable): | Work extension: Position / Job type: |
| Email: | |
| Honorary graduates o Other persons by invi Please note: All men or payment can be se and covers men *********************************** | nembers of the Council of the University of Auckland and honorary officers of the SCR. If the University. Itation of the General Committee of the Staff Common Room Club Inbership is subject to approval by the SCR General Committee. Any enquiries regarding eligibility int to: scradmin@auckland.ac.nz The annual subscription is \$115.00 (including GST) Imbership for the stated of the calendar year (not a 12 month period) *********************************** |
| Applicants | • |
| signature: | Date: |

Please give the completed form and receipt to the Staff Common Room bar staff or email to: scradmin@auckland.ac.nz