

## ***The New Zealand Organ Preservation Trust (Inc.)***

### **Application for Membership**

I wish to apply for membership of the above Trust

Given names \_\_\_\_\_

Surname \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

E-mail \_\_\_\_\_

Telephone (Home) \_\_\_\_\_

(Mobile) \_\_\_\_\_

If accepted, I agree to abide by the [rules](#) of the Trust.

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

Your subscription to the New Zealand Organ Preservation Trust runs from 1 April to 31 March the following year. We prefer direct credit to the NZOPT Westpac Bank account 03-0866-0171409-000. Please put *your name* in 'Particulars' and *Sub* into 'Code' or 'Reference'.

If you want to make a donation (tax deductible if \$5 or more), please make a separate transaction with *Donation* as the 'Code' and *NZOPT* or *NSMF* or *At Risk* as the 'Reference' (depending on whether you want to donate to the Trust or specifically to the Neil Stocker Memorial Fund or to the reserve for organs suddenly at risk). NZOPT will send you a receipt. If you need a paper receipt, please ask. NZOPT is registered charity CC40007.

Complete this form (PDF, scan or photo all fine) and email to the Treasurer. Contact details are here: [nzopt.org.nz/about/](http://nzopt.org.nz/about/)

Subscription \_\_\_\_\_ \$40 ( 2026/27 onwards)

Donation \_\_\_\_\_ \$ \_ \_ \_ \_ \_

(please indicate NZOPT or NSMF or At Risk)

Total \_\_\_\_\_ \$ \_ \_ \_ \_ \_

Thank you for your support.