

Application for Membership

Name

Address

Email

Qualifications

Present position(s)

If elected, I agree to abide by the rules and regulations of the Agronomy Society of New Zealand (Inc)

Signature

Date

Member of New Zealand Institute of Agricultural and Horticultural Science

Yes

No

Return completed form to:

Agronomy Society of NZ
C/- J. Townshend
610 Rakaia Selwyn Rd
RD2
LEESTON 7682

Or email the form to:
treasurer@agronomysociety.org.nz

Membership fee is \$60 per annum. You will be invoiced soon.

Web: <http://www.agronomysociety.org.nz/>

Email: jo.townshend@midlands.co.nz

Agronomy Society of New Zealand