

Note: This application form must always be distributed with the investment statement. If you have not received an investment statement, please download one from www.harbourcoop.co.nz or pick one up from 12 London Street, Lyttelton. Applicants must be over 16 years of age.

Harbour Co-op Membership Application Form

The following application form should be filled in, signed, and:

- ☐ **posted to:** Membership Co-ordinator, Harbour Co-op Limited, P.O. Box 147, Lyttelton 8841
- ☐ **or dropped in** at the Harbour Co-op shop at 12 London Street, Lyttelton.
- ☐ **or emailed** to membership@harbourcoop.co.nz, if you are able to sign the application form electronically.

Your application cannot be accepted until payment has been made. Please get in touch with us if you would like to join but cannot meet the full cost of membership at this time.

Full Name of Primary Shareholder: _____

IRD Number of Primary Shareholder: _____

Full Name of Joint Shareholder (optional): _____

IRD Number of Joint Shareholder: _____

Address: _____

Telephone: _____

Email Address _____

- ☐ I would like to purchase 1 Household Share for \$365.
- ☐ I would like to purchase _____ Supporting Shares at \$1 each (minimum 500, if any).

Please include a deposit slip or other printed document showing your bank account number, with your application form. **Payment Total: \$** _____

Payment Method:

- ☐ **Cash**
- ☐ **EFTPOS**
- ☐ **Cheque** - Make your cheque payable to **Harbour Co-op Limited**, and include your cheque with your application form.
- ☐ **Bank Deposit**

Account Name: **Harbour Co-op Limited**

Account Number: **020842 0040412 97**

Bank: **BNZ, Ferrymead Branch, Unit 9, 2 Waterman Pl, Ferrymead, 8023, New Zealand.**

Reference: **Surname (or first letters of your surname as fit in the reference field).**

Code/ Particulars: Please also include your **phone number** in the Particulars or Code fields. We can use this to contact you if we have any trouble matching up your payment with your application form.) If you have a field left over, your first name as shown on the application form will also be helpful.

I agree to the Co-op giving financial assistance for the purpose of the purchase of shares otherwise than in accordance with sections 76 to 80 of the Companies Act 1993. *

- ☐ **I have received a copy of the Harbour Co-op Investment Statement.**
- ☐ All of the information that I have provided on this form is true and correct.

Signature of Primary Shareholder _____ Date: / /

Signature of Joint Shareholder _____ Date: / /

* Sections 76 to 80 of the Companies Act specify, amongst other things, that all shareholders must be notified about each instance of financial assistance (e.g. allowing someone to pay off a share over time), with that notification including the name of the person receiving assistance. Sections 76 to 80 can be read on the Harbour Co-op website: <http://www.harbourcoop.co.nz/membership/financial-assistance-legislation/> or the New Zealand Legislation Website.