

**MEMBERSHIP** APPLICATION

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| **BUSINESS DETAILS** |  |
| **REGISTERED NAME** |  |  |
| **TRADING NAME (IF DIFFERENT FROM ABOVE)**  |  |  |
| **AFFILIATION WITH PACIFIC ISLAND NATION (STATE ALL)** |
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|  |  |  |
| **TYPE OF BUSINESS:** | **SOLE TRADER 🞏** | **PARTNERSHIP 🞏** | **COMPANY 🞏** |
| **GST REGISTERED - Y/N** |  |  |
| **DATE STARTED BUSINESS:** |  |  |
| **LOCATION:** |  |  |
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| **CONTACT DETAILS** |  |
| **PHYSICAL ADDRESS**  |  | **POSTAL ADDRESS** |
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|  |  |  |
| **WEBSITE** |  |  |
| **PHONE** |  |  |
| **EMAIL** |  |  |

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| **PRIMARY CONTACT** |  |
| **NAME** |  | **JOB TITLE** |
| **EMAIL** |  | **DDI** |

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| **KEY CONTACTS** |  |
| **NAME** |  | **JOB TITLE** |
| **EMAIL** |  | **DDI** |
| **NAME** |  | **JOB TITLE** |
| **EMAIL** |  | **DDI** |
| **NAME** |  | **JOB TITLE** |
| **EMAIL** |  | **DDI** |

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| **STAFF DETAILS** |  |
| **NUMBER OF:** | **PERMANENT** |  |
|  | **FIXED TERM** |  |
|  | **INDEPENDENT CONTRACTORS** |  |



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| **BUSINESS ACTIVITIES** |  |
| **MAIN BUSINESS ACTIVITY (PLEASE DESCRIBE)** |  |
| **BIC CODE:** <https://www.businessdescription.co.nz/> |  |
| **NZ BUSINESS NUMBER:** <https://www.nzbn.govt.nz/> |  |
| **INDUSTRY SECTOR (TICK ALL THAT APPLY)** |
| HOSPITALITY 🞏  | PROFESSIONAL SERVICES 🞏 | RETAIL 🞏 | IT 🞏 |
| CONSTRUCTION 🞏 | HEALTH 🞏 | MANUFACTURING 🞏 | PUBLIC SECTOR 🞏 |
| NOT FOR PROFIT 🞏 | ARTS 🞏 | EDUCATION 🞏 | OTHER 🞏 |

**HOW DID YOU HEAR ABOUT THE WELLINGTON PASIFIKA BUSINESS NETWORK?**

**TERMS AND CONDITIONS**

I/We hereby make application to become a member of WELLINGTON PASIFIKA BUSINESS NETWORK (WPBN)

I/We accept that WPBN may, in its absolute discretion, decline this application without giving reasons.

I/We agree that if our application is successful we will provide WPBN with such information as required for joining.

I/We also agree to the following specific terms and conditions:

1. I/We will advise WPBN in writing if we want our membership to be kept confidential. WPBN collects personal information and information about your business to monitor, analyse and evaluate statistical data to assist us to tailor our services to suit our membership. I/we agree that Wellington Pasifika Business Network may forward our membership details to WPBN approved third parties who may offer products and services which could complement our membership.
2. I/We agree that if for any reason we are dissatisfied with our membership or any services provided by WPBN we will, before resigning or taking any other action, first notify the Executive Officer. On request I/we will meet with WPBN with a view to resolving the problem.

**PRIVACY POLICY**

The Wellington Pasifika Business Network (WBPN) collects personal information from you so that we can help you to promote, strengthen, support, grow, as a Pasifika entrepreneur, ultimately to deliver positive outcomes to Pasifika peoples. Any information we collect about you is necessary for the purposes of WPBN’s work and is treated in a confidential and trusted way, in accordance with the Information Privacy Principles outlined in the Act.

Our Online Privacy Statement/Privacy Policy may be amended as legislation is revised, from time to time. Updated policies will be uploaded to the WPBN website for you to peruse and our practices amended in line with the requirements of the Act.

The Wellington Pasifika Business Network complies with the Privacy Act 2020 (the Act) and the Unsolicited Electronic Messages Act (the EM Act) when dealing with personal information.

If you wish to seek further information on the Act, please visit the Privacy Commissioner’s website at [**www.privacy.org.nz**](http://www.privacy.org.nz)

**CONFIRMATION AND ACCEPTANCE**

We wish to apply for membership of the Wellington Pasifika Business Network and agree to abide by its conditions of membership.

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| --- | --- |
| **NAME** | **SIGNATURE** |
| **TITLE/POSITION** | **DATE OF APPLICATION** |

🞏 Please contact us with information about events and special offers relating to our membership

Please return the form upon completion to Frieda.Crawford@wpbn.org.nz