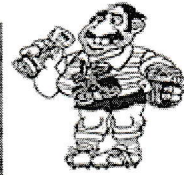


Keith Incorporated

Scaring the Opposition Since 1978



Application for membership of Keith Incorporated.
All fields must be completed for this to be a valid application for membership.

Full Name Surname CHRISTIAN Christian Name(s) ANDREW
Name of Business if Associate / Sponsor Membership PACE PROTECT MANAGEMENT
Residential Address 15 ALPHA AVE
STROMAN
CHERT D.O.B. 9/4/65
Home phone 03 355 3204
Postal Address
Work phone 03 366 4282
mobile 021 858 628
email andy@pacepm.co.nz

Type of Membership
(Please tick box)

- Full Membership Playing
 Full Membership Non Playing
 Associate Member
 Associate Member Sponsor

If Associate Member is being applied for, please give the name and membership number of member supporting your application.

Name Membership Number

I, the above, hereby apply for membership of Keith Incorporated in the type of membership indicated above, and have read and understood the rules of Keith Incorporated and have attached/enclosed the appropriate fee.

I understand that my membership will be approved/declined at the next scheduled meeting of Keith Incorporated and I will be advised as soon as possible after that time of my membership in Keith Incorporated.

Signature

Date 16/10/04

Official Use

Membership APPROVED / DECLINED

Applicant Notified

Membership Number

036

Recorded in Membership Register

24 JUL 2004

Membership Fee Banked

Returned

