

BODY CORPORATE CHAIRS' GROUP INC.

MEMBERSHIP APPLICATION FORM/INVOICE



BCCG's financial year is from 1 July to 30 June.

Branch membership - All members elect to be aligned with the Wellington, Auckland or South Island branch. Financial membership provides access to information and support and on-line resources from all branches.

Membership fee and Branch (no GST payable), please tick the appropriate boxes in the tables below:

Membership Type		
Body Corporate 2-9 Units	\$75	<input type="checkbox"/>
Body Corporate 10 or more Units	\$150	<input type="checkbox"/>
Associate (company)	\$300	<input type="checkbox"/>
Associate (individual)	\$75	<input type="checkbox"/>

Branch:	
Wellington	<input type="checkbox"/>
Auckland	<input type="checkbox"/>
South Island	<input type="checkbox"/>

Please mail the form to The Secretary of your chosen branch, and bank funds on-line to 06 0507 0243976 28 or, email accounts@bccg.org.nz and an invoice will be sent to you.

Addresses details are:

- **Auckland branch** – PO Box 911 151, Auckland 1142 – email: abccgadmin@bccg.org.nz
- **Wellington branch** – PO Box 9219, Wellington 6141 – email: bccg@bccg.org.nz
- **South Island branch** – PO Box 9219, Wellington 6141 – email: bccg@bccg.org.nz

Note: Your membership will be activated upon payment of your invoice. Access to Member Resources may be suspended until your payment is received.

BODY CORPORATE DETAILS

BC name:

BC number:

Physical address:

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CONTACT DETAILS, (BC or Associate)

Name:

Email:

Contact phone:

Contact is the BC Chair: Y / N

BC PROPERTY DETAILS

Is it Company Share? Y / N

Is it Time Share? Y / N

Is it Cross Lease? Y / N

Is it a Residents' Society? Y / N

Year building was constructed:

Number of residential units:

Number of commercial units:

Number of retail units:

Number of garages (principal units):

Other Areas of Special Interest.

(This info assists with BCCG communications)

My BC has a registered heritage status Y / N

My BC is earthquake prone Y / N

My BC has leaky building issues Y / N

My BC has ground issues Y / N

My BC is GST Registered Y / N

If applicable, provide details of:

YOUR BC MANAGEMENT COMPANY

Company name:

Company Contact name:.....

Company Contact email:

Company Contact phone:

If applicable, provide details of:

ASSOCIATE (Company) DETAILS

Company name:

Nature of Business:

Physical address:

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