

# Membership Directory information and consent form

**Dear Member**

Please complete, sign, date and send this form to [handcraftprinters@gmail.com](mailto:handcraftprinters@gmail.com) so your information can be included in the next edition of our Membership Directory and circulated (only) to members. Just fill in the information you agree to be published. Some fields may be pre-populated. If you do not want that info published, please strike through it.

<b>First Name</b>	<input type="text"/>
<b>Surname</b>	<input type="text"/>
<b>Email</b>	<input type="text"/>
<b>Press name</b>	<input type="text"/>
<b>Address 1</b>	<input type="text"/>
<b>Address 2</b>	<input type="text"/>
<b>Town_City</b>	<input type="text"/>
<b>Postcode</b>	<input type="text"/>
<b>Phone</b>	<input type="text"/>
<b>Mobile</b>	<input type="text"/>
<b>Equipment and Special interests</b>	<input type="text"/>

**Consent** I consent to the above information being published in editions of the Membership Directory issued from time to time by the Association of Handcraft Printers NZ Incorporated

**Signature** .....

**Date** .....

**Please scan or photograph the completed form and email it to [handcraftprinters@gmail.com](mailto:handcraftprinters@gmail.com)**