

**Template Party Membership Form**

**Guidance notes**

* The template form can be used by a party seeking registration under Part 4 of the Electoral Act 1993 to provide evidence that it has at least 500 current financial members who are eligible to enrol as electors. Please refer to the Party Registration Handbook for more information about these requirements.
* The template contains the **minimum requirements** for the Electoral Commission’s registration purposes **in bold**. A party may seek or include further information on the form for its own purposes.
* Branding of the form, including the party logo, is recommended to ensure party members have a strong recall of joining the party, rather than supporting a specific cause.
* A person can check their own enrolment details online at [www.vote.nz](http://www.vote.nz). The party can check their members’ enrolment details against the printed rolls available for public inspection at offices of the Electoral Commission and public libraries.
* A common problem for parties applying to be registered is that some of their members are not eligible to enrol as New Zealand parliamentary electors. This occurs even though members have confirmed that they are eligible to enrol. To assist parties and the Electoral Commission ascertain whether members are eligible to enrol some supplementary informationis suggested. For more information about who is eligible to enrol see Part 2 of the Party Registration Handbook.
* It is compulsory for a person to register as an elector in New Zealand if they are eligible to enrol. Only registered electors are eligible to vote in parliamentary elections. Members who are not enrolled can enrol online (with a NZ driver licence, NZ passport or RealMe verified identity), or download an enrolment form at [www.vote.nz](http://www.vote.nz), Freetext 3676 with their name and address or ring 0800 36 76 56 to request an enrolment form.
* Where multiple members are included on one form (i.e. joint or family memberships) it must be clear how much is paid on behalf of each member and each individual member must sign the form.
* A party may also have other types of membership, e.g. members under 18 years old (who are not eligible to enrol), or life members (who do not pay fees), but these cannot count towards the 500 for registration.

Application form to join the *[name of party]*

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| Member’s details |
| **Full name** |  |
| **Residential street address** **Suburb, town, city or locality**[not a PO Box address] |  |
| Date of birth |  |
| Telephone number/s |  |
| Email address  |  |

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| --- |
| Enrolment details |
| **I am a registered elector YES/NO**enrolled in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ electorate |
| *Complete if you are not a registered elector* **I am not a registered elector but I am eligible to enrol YES/NO**You are eligible to enrol if you are a New Zealand citizen or permanent resident of New Zealand, 18 years old or older and have resided in New Zealand continuously for one year or more and are not disqualified from enrolling. Contact the Electoral Commission if you are unsure whether you are eligible to enrol.I am eligible to enrol as a New Zealand parliamentary elector as I am a (select one):* New Zealand citizen
* permanent resident of New Zealand
* other – please specify: ­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

and I have lived continuously in New Zealand for \_\_\_\_\_\_\_ years \_\_\_\_\_\_\_\_ months.  |
| If you live overseas provide the date last in New Zealand \_\_\_\_ /\_\_\_\_ /\_\_\_\_ |

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| --- |
| Membership details |
| **I enclose/have paid my membership fee of $\*\*.\*\* for a [*1/2/3 year*] membership with this application.** |
| **I authorise [*name of party*] to record my name as a financial member of [*name of party*].** |
| **I authorise the secretary of [*name of party*] to release this application form and subsequent financial membership details to the Electoral Commission for the purposes of [*name of applicant party’s*] registration under the Electoral Act 1993.** |

**Signed** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**[*Signature of person applying*]**