Multicultural TAURANGA

Individual Membership

Application / Renewal Form

Membership Year: 2026-2027

Thank you for your interest in becoming a member of the Tauranga Regional Multicultural Council (TRMC). Please complete this form to apply for or renew *individual* membership.

Payment details :

Bank - Tauranga Regional Multicultural Council

Account #-01-0322-0191989-30

1. Personal Details

Full Name:	_____
Date of Birth:	_____
Postal Address:	
Physical Address: (if different)	
Phone:	_____ **Email:** _____
Occupation :	_____

2. Membership Details

Please tick one:	☐ **Individual Membership - $25** ☐ **Student Membership - $10**

If applying for student membership, please provide the name of your school, tertiary institution, or training provider:	
Payment Method:	**□ Bank Transfer** **□ Other: _____**

3. Areas of interest

Briefly describe yourself (background, other interests, or what you do):	
Communities you identify with or support:	
Interests, volunteer involvement, or multicultural connection:	**Attending multicultural events and activities □** **Volunteering □** **Supporting migrant and former refugee communities □** **Sharing my culture, knowledge, or experiences □** **Connecting with other community members□** **Supporting multicultural festivals and events□** **Community advocacy and participation □** **Workshops, training, and learning opportunities □** **Other:** **_____**

4. Commitment to Multiculturalism

As an individual member, I support TRMC's commitment to promoting a welcoming, inclusive, and connected Bay of Plenty through:

- **cultural diversity, inclusion, and belonging;**
- **positive relationships between communities;**
- **participation and wellbeing of migrants and former refugees; and**

- a respectful, safe, and welcoming community for all.

5. Declaration

I confirm that the information provided in this application is accurate.

Name:	_____
Signature:	_____ **Date:** _____

6. TRMC Office Use Only

FOR TRMC OFFICE USE ONLY

Application received:	_____
Membership approved:	☐ Yes ☐ No
Membership year:	_____
Fee received:	$_____
Receipt / Reference No.:	_____
Entered into Membership Register:	☐ Yes
Authorised by:	_____
Date:	_____