

WORKPLACE MEMBERSHIP APPLICATION FOR WHĀNAU/FAMILY



Workplace membership for family/whānau of employee

As an employee of an approved Workplace with Auckland Council Pools and Leisure, your whānau/family are entitled to the same membership rate as you. Please complete one form per family member who is taking up the Auckland (multi-access) Membership with Auckland Council Pools and Leisure and participating CLM and The Y facilities.

Employee details

Employee name: _____

Your relationship to whānau/family member: _____

Your whānau/family member name: _____

Date of birth: / /

Contact phone: _____

Email: _____

Declaration

- I understand that while I am an employee of _____ whānau/family members are also entitled to the special discounted Auckland (multi-access) Membership.
- I understand that when my employment ends, any discounts will be removed from any whānau/family memberships.
- I will advise Auckland Council Pools and Leisure when my employment ends.

Authorising signatures

Employee signature _____

Date: / /

Family member signature _____

Date: / /

Pool and Leisure Centre use only

Membership no: _____

Date: / /

Staff name: _____

Signature _____