

# Join Victory for Labour!



Save time do it online at [labour.org.nz/join](http://labour.org.nz/join)

PAYMENT DETAILS

I want to join Victory for Labour and contribute \$ \_\_\_\_\_ each month  
Suggested donation \$5 per week (\$20 per month) can help print over 2,500 leaflets during the course of a year!

I would like to contribute by:

**Internet Banking** to BNZ 02 0568 0048605 05 Victory for Labour

**Credit Card**  Visa  Mastercard

Number

Expiry date \_\_\_ / \_\_\_

Name on card \_\_\_\_\_

Signature \_\_\_\_\_

**Automatic Payment** - Please complete box below

## New Zealand Labour Party Authority for Automatic payments

Payer details				
Name of Bank	Branch			
Address				
Name of Account				
Account Details				
Bank	Branch No	Account No	Suffix	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Commencing date ___ / ___ / ___		(Please allow enough time for us to send this to your bank)		
Frequency (Until further notice)				
<input type="checkbox"/> Four weekly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Half yearly	<input type="checkbox"/> Yearly
Amount \$ _____		Amount in words _____		
<b>Pay to the credit of: 02 0568 0048605 05</b>				

### For Bank Use

01    02   6  2B

A/P No.

11     12     13

Non Std Com

Bulk/G.A code

Freq. Override

### Conditions:

I/We understand and accept that the bank accepts this authority only upon the following conditions, namely:

1. The Bank will endeavour to effect such automatic payments without any responsibility or liability for any refusal or omission to make all or any of the payments or for late payment or for any omission to follow any such instructions. Further, the Bank accepts no responsibility or liability for the accuracy of the information contained in the payment information fields on this authority or for failure to transmit such information in the manner requested. In any event this authority is subject to any arrangement now or hereafter subsisting between myself/ourselves and the Bank in relation to my/our account.
2. the Bank may in its absolute discretion conclusively determine the order or priority of payment by it of any money in accordance with this or any other authority or cheque which I/we may now or in the future give to the Bank or draw on my/our account.
3. The Bank may at any time terminate this order as to further payments by notice in writing to me/us - or without notice at any time after being advised in writing by the above named payee that payment is required.
4. This order will remain in full force and effect in respect of all payments made in good faith notwithstanding my/our death or bankruptcy or any other revocation of this order until notice of my/our death, bankruptcy or such revocation is received by the Bank.
5. All current Bank charges for this service in force from time to time are to be added to the payment amount and debited to my/our account.

This is a new authorisation

Authorisation	Signature	Date
Please make this automatic payment by debiting my/our account. I/We understand and accept that the bank accepts this authority only on the conditions above.		

Please update your personal details and address in the space provided

Title + Fullname	_____	Residential Address	_____
Preferred Name	_____		_____
Date of Birth	_____	Gender	_____
Occupation	_____		_____
Ethnicity	_____		_____
Home Phone	_____		_____
Mobile Phone	_____		_____
Email	_____	Postal Address	_____

### Extras

Yes, I would like to receive information about:

- Volunteering** - there's heaps of ways your time can help your local team
- The President's Club** - make a direct difference to our campaigns
- How to arrange a bequest** - to make a lasting legacy to the future of NZ

YOUR DETAILS

