

Application to become a NZPPA Committee Member

Name:	
Location:	
NZPPA Membership number:	
Committee Name:	
What position do you want in this committee?	Committee Member or Chairperson (Cross out the one not applicable)
Please outline your interest or qualifications in this area and what skills and abilities you would bring to this committee:	

**Thank you for your application.
Please email this application to david@nzppa.co.nz**