

# N Z L C A

## NEW ZEALAND LACTATION CONSULTANTS ASSOCIATION (INC)

PO BOX 29-117 AUCKLAND, NEW ZEALAND

www.nzlca.org.nz Email: membership@nzlca.org.nz

### Membership /Subscriber Form - January 2017 to December 2017

TAX INVOICE: GST NO 60 561 222

All NZLCA members and subscribers receive the NZLCA electronic publication 'Staying Abreast'.

Name.

Address:

Ethnicity:  Iwi affiliation  (if applicable).

Phone  (H) OR  (W) OR  (mobile)

Email

Workplace Position   Employed  Self-Employed

Please tick the appropriate category: (Prices are GST inclusive (NZ\$))

**IBLCE NUMBER** Year qualified/or recertified  \$ 100.00

**SUBSCRIBER** (not applicable to IBCLCs) \$ 50.00

DONATION to the NZLCA Education Fund (Donations of \$5.00 or more are tax deductible) \$

**TOTAL AMOUNT INCLUDED:** \$

Tick if paid by attached cheque

Tick if paid by internet banking NZLCA account: Kiwibank 38-9012-0851196-05

**For internet banking ensure your name is clearly stated on the bank account details.**

**Print & send or scan & email your completed application form for our membership list.**

Note: you are not a member until your payment appears on our bank statement.

Are you a Financial Member of ILCA (International Lactation Consultant Association)?  Y  N

ILCA Membership Number

Tick **ONLY IF YOU DO NOT AGREE** to your name and contact details being given to other IBCLCs and also to organisations approved by NZLCA Executive.

Signature ..... Date

Membership/subscriptions are for the period January through to December. If you join in October, November or December, your membership will be effective for the following membership year, and your first 'Staying Abreast' newsletter will be the following February issue.

#### OFFICE USE ONLY

Membership No. \_\_\_\_\_ Receipt No. Membership \_\_\_\_\_ Receipt No. Donation: \_\_\_\_\_

Entered into database (circle): Membership Directory Date paid \_\_\_\_\_ Cheque/Internet Letter Sent \_\_\_\_\_

# N Z L C A

PLEASE READ THIS SECTION AND **ONLY COMPLETE IF APPLICABLE**

## **NZLCA DIRECTORY OF IBCLCs WHO ARE AVAILABLE FOR CONSULTATIONS** via [www.nzlca.org.nz](http://www.nzlca.org.nz) and 0800 452 282

---

This section is **ONLY** to be completed by NZLCA members who are also IBCLCs currently practising in New Zealand, who wish to have their name and telephone number in the NZLCA Directory. The Directory will be available to the NZLCA 0800 telephone coordinator and your name and number will be made available to members of the public seeking a Lactation Consultant. The information will also be available on-line on our web site at [www.nzlca.org.nz](http://www.nzlca.org.nz) for members of the public who are seeking a Lactation Consultant.

The information in this Directory will be held separately from the membership/subscriber list. The Directory is used to assist consumers to access a Lactation Consultant in their locality. Only provide those details which you wish to be given out to members of the public and only complete this section if you are available for consultation. The information given in the membership/subscription section on the previous page will not be sourced. The details you give will be used in accordance with the Privacy Act (1993).

Name

Telephone  (W)  (Mobile)  (H)

Email

Website

Geographical Area covered

Cost of service

Services offered:

private practice     employed     phone consult     clinic visits     home visits

Working Days & Times Available

Agreement is given to provide my details in this section to consumers seeking the services of a Lactation Consultant via NZLCA's 0800 number (0800 452 282) and website.

Signature .....

Date

Please help us by advising NZLCA of any changes to your details to [membership@nzlca.org.nz](mailto:membership@nzlca.org.nz)

---