

**New Zealand Tattooists Guild Inc.
Membership Application Form**

Applicant Details

Full Name: _____

Phone Number: _____

Email Address: _____

Residential Address:

Declaration

I hereby apply to become a member of the **New Zealand Tattooists Guild Inc.**

I declare that, if accepted, I agree to:

- Abide by the **Constitution** of the New Zealand Tattooists Guild Inc.;
- Uphold the **Code of Conduct** and **Duty of Care** as prescribed by the Guild;
- Promote the principles and objectives of the Guild;
- Conduct myself in a manner that reflects the integrity and professionalism of the tattooing industry in Aotearoa New Zealand.

I understand that failure to comply with the above may result in disciplinary action, including suspension or termination of membership, as outlined in the Guild's Constitution and policies.

Signature of Applicant: _____

Date Signed: ____ / ____ / _____

Please return this completed form to the Guild via post to

New Zealand Tattooists Guild Inc,

109 College Hill, Freemans Bay, Auckland 1011 New Zealand

or email a scan/clear photo to

newzealandtattooistsguild@gmail.com

Thank you for your interest in the New Zealand Tattooists Guild Inc.