



PLEASE JOIN ME UP TO CAN

Name _____

Address _____

Suburb _____

City _____

Phone _____

Fax _____

E-mail _____

Occupation _____

MEMBERSHIP FEES

Unwaged \$15 Waged \$30

Family \$35 Supporting organisation \$75

Enclosed is my/ our membership fee \$.....

Plus a donation of \$.....

Total \$.....

(Make cheques payable to Cycling Advocates Network)

Please send information about 'Cycle Safe' insurance.

How did you find out about CAN? _____

Please attach your cheque and send (no stamp required) to:

CAN, Freepost 147092, PO Box 6491, Auckland

We respect your privacy and won't give your details to anyone not affiliated to CAN.