



## 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.