

## HASANZ Membership Application Form

Please complete this form electronically and return to: [info@hasanz.org.nz](mailto:info@hasanz.org.nz) for the attention of the Office Manager, Mia Hradsky. HASANZ has produced a document "HASANZ Membership: Information for Applicants" that should be referred to for guidance on how to complete this form. If you have any questions, please contact Mia on 027 201 1759.

<p><b>1. General Information:</b> Membership is open to associations (whether incorporated or unincorporated) that represent professions working within the workplace health and safety sector in New Zealand (see clause 13.2 of the HASANZ Rules).</p>			
<p><b>Name of Organisation:</b> (Full legal name). <i>Attach a copy of your certificate of incorporation or other evidence such as your society's constitution.</i></p>			
<p><b>Postal Address:</b></p>		<p><b>Street Address:</b></p>	
<p><b>Web:</b></p>		<p><b>Email:</b></p>	
<p><b>Key contact person regarding this application:</b></p>			
<p><b>Name:</b></p>	<p><b>Position in organisation:</b></p>	<p><b>Email:</b></p>	<p><b>Phone</b></p>
<p><b>President/National Manager/Executive Director/Chief Executive:</b></p>			
<p><b>Name:</b></p>	<p><b>Position in organisation:</b></p>	<p><b>Email:</b></p>	<p><b>Phone:</b></p>
<p><b>The person who will represent your association is:</b></p>			
<p><b>Name:</b></p>	<p><b>Position in organisation:</b></p>	<p><b>Email:</b></p>	<p><b>Phone</b></p>
<p><b>Secretary/Administrator is:</b></p>			
<p><b>Name:</b></p>	<p><b>Position in organisation:</b></p>	<p><b>Email:</b></p>	<p><b>Phone:</b></p>
<p><b>Which category of membership does your association seek? (please mark with a cross)</b></p> <p> <input type="checkbox"/> Full Member         <input type="checkbox"/> Associate Member       </p>			
<p><b>2. Information about your association</b></p> <p>HASANZ member associations must represent a material number of recognised professionals (within a single professional group or multiple professional groups) working within the workplace health and safety sector in New Zealand (as specified in clause 14.1(b) of the HASANZ Rules).</p> <p>Please provide information and relevant supporting evidence on the number of individuals and businesses/corporates that are members of your association and in what aspects of the health and safety professions they practise.</p>			
<p><b>Statement</b></p>		<p><b>Supporting evidence</b></p>	

### **3. Contribution to overall workplace health and safety of New Zealanders**

To become a member, applicants must provide evidence of the contribution of their profession or professions and the association to the workplace health and safety of New Zealanders or other information demonstrating the commitment of the association to so contribute (as specified in clause 14.1(a) of the HASANZ Rules).

**Statement**

**Supporting evidence**

**4. Other information:** Please provide any other information you consider relevant to your application.

## 5. Alignment with purposes of HASANZ

Members of HASANZ have a shared vision for the future of workplace health and safety in New Zealand so any new member must align with the purposes of HASANZ (which are set out in clause 3.1 of the HASANZ Rules). Applicants (for both Full and Associate membership) are required to provide evidence that their association aligns with and promotes the purposes of HASANZ and has a vision for the future of workplace health and safety in New Zealand that is shared with HASANZ and with other members (clause 14.1(e) of the HASANZ Rules).

**If you are seeking either Associate or Full membership**, please state how your association meets one or more of the HASANZ purpose statements and provide relevant supporting evidence which may be appended to this application or provided via web links.

<b>Purpose</b>	<b>How your association achieves this</b> Please state in what way(s) your organisation meets the purpose statement	<b>Supporting evidence</b> Please list supporting documentation, and specify whether the documentation is attached - or include web links.
<b>5(a)</b> Promote and influence excellent health and safety outcomes for everyone in New Zealand (clause 3.1(a) of the HASANZ Rules).		
<b>5(b)</b> Advance the health and safety professions in New Zealand (clause 3.1(b) of the HASANZ Rules).		
<b>5(c)</b> Enable collaboration between diverse health and safety professions to promote and develop excellence in health and safety practice (clause 3.1(c) of the HASANZ Rules).		

## 6. Professional Practice Requirements (required for Full membership only)

Full members of HASANZ must meet the requirements for member associations' professional practice (as set out in clauses 13.2 and 13.3 of the HASANZ Rules).

**If you are seeking Full membership**, please state how your association meets each of the HASANZ professional practice statements and provide relevant supporting evidence, which may be appended to this application or provided via web links.

<b>Professional Practice</b>	<b>How your association achieves this</b> Please state in what way(s) your organisation meets the professional practice statement	<b>Supporting evidence</b> Please list supporting documentation, and specify whether the documentation is attached - or include web links.
<b>6(a)</b> Ensure that members act to maintain high standards at all times (clause 13.2(a) of the HASANZ Rules).		
<b>6(b)</b> Ensure that members are competent in their chosen sector through training (clause 13.2(b) of the HASANZ Rules).		
<b>6(c)</b> Ensure that members maintain their skills through continuing professional development (clause 13.2(c) of the HASANZ Rules).		
<b>6(d)</b> Ensure that members commit to behaving ethically to protect the interests of the public and are of good character and professional standing (clause 13.2(d) of the HASANZ Rules).		
<b>6(e)</b> Encourage its members to hold, where applicable, professional, public and statutory liability insurance (clause 13.3 of the HASANZ Rules).		

Thank you for your time to complete this application form. On receipt of this application, HASANZ will invoice you the application fee. This application will be considered by the HASANZ Managing Committee once the fee is paid and its decision will be advised in due course.