



New Zealand Minerals Industry Association

To find out more about company or associate membership fill out this form and fax or post.

Company details

Company name: _____

Phone: _____

Fax: _____

Email: _____

Website: _____

Nature of business: _____

Postal address: _____

City: _____

Postcode: _____

Company contact person details

Name: _____

Job Title: _____

Phone: _____

Fax: _____

Email: _____

Mobile: _____