



## CONTINUING PROFESSIONAL DEVELOPMENT (CPD) REGISTRATION FORM

Please find enclosed a copy of the NZIMRT Continuing Professional Development Programme Background Information and Requirements Booklet. The Booklet outlines the two CPD options available to you should you wish to apply to register for the Programme.

For further information please contact the NZIMRT General Secretary.

Full Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_

NZIMRT Membership Number (if applicable): \_\_\_\_\_

Daytime Phone Number/s: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

I wish to register for the NZIMRT Continuing Professional Development Programme:

CREDITS OPTION                      OR                       PORTFOLIO OPTION

Current or Previous CPD Number: \_\_\_\_\_

NZIMRT MEMBER FEE: \$90.00    OR                       NON-MEMBER FEE: \$490.00

Proof of registration may be advised to MRTB on their request.

Please select payment method:

Cheque / Bank Draft (Payable to: NZIMRT)

OR

Visa                       Mastercard

**Credit Card Number:**

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Name on Credit Card: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return completed form and payment to:  
General Secretary, NZIMRT, PO Box 25 – 668, St Heliers, Auckland**