



**New Zealand Society of Translators and Interpreters**  
*Te Rōpū Kaiwhakamāori ā-waha, ā-tuhi o Aotearoa*

## Application for Membership

Given Name:.....

Surname:.....

Preferred Titles (Mr Mrs Ms Miss Dr Prof Rev etc):.....

Native Language/s:.....

<b>Working Languages (Translation)</b> Source Language - Target Language	<b>Qualifications<sup>1</sup> / Experience<sup>2</sup></b>

<b>Working Languages (Interpreting)</b> Language A - Language B	<b>Qualifications<sup>1</sup> / Experience<sup>2</sup></b>

<sup>1</sup>Qualifications in full, plus abbreviations. For degrees etc please state majors **relevant to Translation / Interpreting**. Please attach **certified** copies of relevant supporting documents.

<sup>2</sup>Extensive and well-documented translation or interpreting experience may be considered in special cases where academic qualifications are not available. For more information, contact the NZSTI secretary.

**CONTACT DETAILS:**

**PREFERRED ADDRESS**

**Alternative address**

Street address:.....  
.....  
Suburb:.....  
City: .....  
Postcode:.....  
Country:.....  
(Overseas applicants must have strong links to NZ or Australia)  
Email:.....  
Phone:.....  
Mobile Ph:.....  
Fax:.....  
Website:.....

Street address:.....  
.....  
Suburb:.....  
City: .....  
Postcode:.....  
Country:.....  
(Overseas applicants must have strong links to NZ or Australia)  
Email:.....  
Phone:.....  
.....  
Equipment:.....  
.....  
(Fax, computer, specialised translation software etc)

**SPECIALTIES: (Please tick appropriate boxes)**

- |   |  |
|---|--|
| <input type="checkbox"/> General Translation                | <input type="checkbox"/> General Interpreting                |
| <input type="checkbox"/> Financial Translation              | <input type="checkbox"/> Business Interpreting               |
| <input type="checkbox"/> IT / Computing Translation         | <input type="checkbox"/> Conference Interpreting             |
| <input type="checkbox"/> Legal Translation                  | <input type="checkbox"/> Diplomatic Interpreting             |
| <input type="checkbox"/> Literary Translation               | <input type="checkbox"/> Education Interpreting              |
| <input type="checkbox"/> Medical Translation                | <input type="checkbox"/> Healthcare Interpreting             |
| <input type="checkbox"/> Patent Translation                 | <input type="checkbox"/> Legal / Court Interpreting          |
| <input type="checkbox"/> Scientific / Technical Translation | <input type="checkbox"/> Scientific / Technical Interpreting |
| <input type="checkbox"/> Other Translation.....             | <input type="checkbox"/> Other Interpreting.....             |
| .....   | .....  |

**DECLARATIONS**

- I agree to abide by the Constitution and the Bylaws of the Society and to pay the stipulated membership fee and entrance fee.
- I have read and agree to abide by the Code of Ethics of the Society.

**Privacy Declaration:**

- NZSTI must collect and store the above information for our purposes only. Our online searchable Directory is an **optional free service to members**.
- I wish to be included in the NZSTI online searchable directory (**tick** ✓ if required).

\_\_\_\_\_  
(Signature of applicant)

\_\_\_\_\_/\_\_\_\_\_  
(Date)

Please send the completed application form and any supporting documents to:  
**The National Secretary, PO Box 109-677, Newmarket, Auckland 1149**  
*Please do not send any payment now, you will be invoiced upon acceptance.*