

Fee Payment Form

NAME:	REGISTRATION NUMBER:
ADDRESS:	

Please indicate the fee(s) you intend to pay:

<input checked="" type="checkbox"/>	Services	Amount (incl. of GST)	
	Registration Fee: NZ - qualified Scientist	\$230.00	
	Registration Fee: Overseas - qualified Scientist	\$480.00	
	Registration Fee: NZ - qualified Technician	\$120.00	
	Registration Fee: Overseas - qualified Technician	\$350.00	
	Alteration to scope of practice	\$230.00	
	Certificate of registration	\$45.00	
	Certificate of Good Standing (*)	\$100.00	
Amount Total:			\$

PLEASE NOTE ALL OF THE ABOVE FEES ARE NON-REFUNDABLE

NOTE: Payment for an Annual Practising Certificate is made on the Annual Practising Certificate Application Form which you can download from the Board's website.

(*) You can request the Board to forward these documents directly to another registration body/employer. Please provide name and address below:

NAME:	ADDRESS:
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PAYMENT DETAILS

All fees must be paid in New Zealand dollars (NZ\$) by bank draft, New Zealand trading bank cheque, or credit card. Your application cannot be processed if payment is received in a foreign currency.

Enclosed is my **cheque/bank draft** for NZ\$ _____ made payable to: The Medical Laboratory Science Board.

Credit Card: Please debit my (tick one) Visa MasterCard

Card Number

Expiry Date: _____ Amount: _____

Cardholders Name: _____ Cardholders Signature: _____