



PAYMENT FORM

Name

Registration No.

Tick an Option(s)

<input checked="" type="checkbox"/>	Services	Amount (incl GST)	
<input type="checkbox"/>	Application to register (New Zealand Graduate)	350.00	
<input type="checkbox"/>	Application to register (Overseas Graduate)	800.00	
<input type="checkbox"/>	Application to register (TTMRA)	350.00	
<input type="checkbox"/>	Application to add a further scope of practice	190.00	
<input type="checkbox"/>	Application to register in a trainee scope of practice	190.00	
<input type="checkbox"/>	An addition or alteration to the Register maintained by the board	100.00	
<input type="checkbox"/>	Copy of Registration Certificate	60.00	
<input type="checkbox"/>	Supply to any medical radiation technologist of a copy of any entry in the Register	40.00	
<input type="checkbox"/>	Restoration to the register	50.00	
<input type="checkbox"/>	Letter of good standing	140.00	
<input type="checkbox"/>	Examination Fee	2620.00	
Amount Total \$			

Medical Radiation Technologists Board GST No. 73-081-092

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
"New Zealand Medical Radiation Technologists Board"

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

Card Number CVV

Expiry Date _____ Amount (NZ\$) _____

Cardholder's Name _____

Cardholder's Signature _____