

# Registering a New Book Group

Please complete *both* sides of this form and return to Book Discussion Scheme:

Post: PO Box 7126, Christchurch 8240 or Email: [bds@bds.org.nz](mailto:bds@bds.org.nz) or

Drop off: 425 Colombo St, Sydenham, Christchurch 8023

## CONVENOR'S DETAILS (your group's main contact person)

Name

Home address

Post code

Rural delivery? Y N

Phone Day

Evening

Mobile

Email

## SECONDARY CONTACT (required)

Name

Phone Day

Evening

Mobile

Email

## BOOK GROUP DETAILS

Full Programme (one book per month; 10 books total)

Half Programme (one book every two months; five books total)

No. of members (max 12)

Open to prospective members? Y N

Meeting Day (e.g. 3rd Mon)

Time Daytime Evening

In which month do you wish to receive your first book set?

(remember, you will discuss this book at the *following* month's meeting)

**About your group** (e.g. no. of men/women, age range, genres, fun/serious etc. This helps us determine who we are serving and how we can improve access to book groups for others. It will also be used on our website if you have said you are open to prospective members).

Would you like to receive the latest titles before discussion notes are ready? (generic notes are provided instead) Y N

## DELIVERY DETAILS

Collect from 425 Colombo Street, Sydenham, Christchurch

Courier to convenor's home address (above)

Courier to the address below:

Post Code

Rural Delivery? Y N

**HOW DID YOU HEAR ABOUT BDS?** (tick all that apply)

Internet search	Facebook
Print advert	Instagram
Word of mouth	Event
Other	

**IMPORTANT:**  
**COMPLETE BOOK SELECTION AND  
PAYMENT DETAILS OVERLEAF** →

# Your Book List

Please choose 25 titles (15 for a half programme) from our catalogue (also available online at [www.bds.org.nz/books](http://www.bds.org.nz/books))  
You can update or re-prioritise your list anytime once you have registered and been issued with your online login details.

Half year: Select 15 titles	1
	2
	3
	4
	5
	6
	7
	8
	9
	10
	11
	12
	13
	14
	15
Full year: Select 25 titles	16
	17
	18
	19
	20
	21
	22
	23
	24
	25

IS YOUR LIST IN ORDER OF PREFERENCE?	Y	N
--------------------------------------	---	---

## PAYMENT DETAILS

Your one-off \$30 new group registration fee (or notification of internet banking) MUST accompany this form.

Cash/EFTPOS (in person only)

Internet Banking (use convenor name as a reference)

Our account no. is: 02 0800 0726088 000

## Membership fees

Cash/EFTPOS (in person only)

Internet Banking

OR

I intend to collect membership fees from my group at our first meeting (please pay promptly to avoid delays in receiving your next set of books)

## Optional

Return NZ Post Trackpak courier bags (large, fit 7-12 books)

5 bags

10 bags

None

Total amount enclosed/paid \$

## CONVENOR DECLARATION

I agree to adhere to BDS' terms and conditions outlined at [bds.org.nz/terms-a-conditions](http://bds.org.nz/terms-a-conditions). I understand my responsibilities as convenor and agree to receive emails from BDS which may contain important updates for convenors, new BDS products and services and other literary news and events. The BDS privacy policy can be viewed at [bds.org.nz/privacy](http://bds.org.nz/privacy)

Type name

Date

Please download, save your changes and email this form to  
[bds@bds.org.nz](mailto:bds@bds.org.nz)