



## Request for a Certificate of Registration

To obtain a Certificate of Registration (suitable for framing), complete this form below and send it to the Board:

**By mail to:**  
The Physiotherapy Board  
PO Box 10-734  
Wellington 6143

**By email to:**  
The Physiotherapy Board  
registration@physioboard.org.nz

Full Name (as entered on the Register): \_\_\_\_\_

Registration Number: \_\_\_\_\_

The Certificate of Registration is to be mailed to:

<b>Your postal address:</b>
Is this a new address? <input type="checkbox"/>

Signature of Registrant: \_\_\_\_\_

**The Certificate of Registration confirms registration only.  
It does not confirm good standing or the holder's current practising status.**

There is a NZ\$69.00 fee for providing a "Certificate of Registration".  
Please complete the payment advice below. Payment in New Zealand dollars only.

### PAYMENT ADVICE: Certificate of Registration

Amount payable: **\$69.00**      Debit/Credit Card:     Visa     MasterCard       Bank Draft

Card number:          -     -     -

Expiry date:      Month / Year

Card security number:              *For Visa or MasterCard, the card security code is the last 3 digit number located on the back of your card, printed on the signature panel.*

Name on card:

Cardholder's Signature:

I authorise the Physiotherapy Board to charge the credit card account above with the sum of \$NZ69.00 (GST incl).