

Applicant details



## Age friendly Aotearoa New Zealand Network application form

Before completing this form, please read the Age friendly Aotearoa New Zealand Network Terms of Reference and ensure that you understand the expectations and eligibility criteria of membership.

If you have any questions about this form or about the Network, please email us at: <a href="mailto:agefriendlynetwork@msd.govt.nz">agefriendlynetwork@msd.govt.nz</a>

Name of organisation	
Primary local lead	
(key contact person)	
Role/organisation	
Email address	
Phone number	
Second nominated	
local lead	
Role/organisation	
Email address	
Phone number	

## Your community

Tell us about your city, town, or co	ommunity
Location	
Total population	Number of population aged 50+  Percentage of population aged 50+
Age friendly webpage (if you have one)	proposation ages es
Your Age friendly work	
What commitment has your orga Age friendly strategy or plan for	anisation made to supporting the development of an your community?
<ul><li>memo/briefing, meeting minu</li><li>If your organisation is not a l</li></ul>	hat demonstrates this commitment eg, signed utes ocal council, please also provide a letter of support from its its ongoing commitment to your organisation's work
Briefly describe the Age friendly with your community	y work that your organisation already has underway
strategy or action plan your	of how far along the development or implementation of a organisation is (eg, planning for strategy development, existing strategy) Include links to relevant websites,

## Your needs, ideas and goals for the Network

What do you want to get out of being involved in the Network?		
•	Please describe how you think the Network will support the work of your organisation	
Do y	you have any ideas about how the Network could function best?	
•	Please provide us with any ideas or thoughts about the types of things you think might help organisations leading Age friendly strategies or action plans in New Zealand	
-	you have any specialist skills or experience you think would be helpful to eloping the Network?	
•	Please provide a brief description of any specific skills or experience you would be willing to share to help develop the Network and/or to assist others with their Age friendly work	

## Next steps

Please send this completed form to  $\underline{agefriendlynetwork@msd.govt.nz}$