

Application to InternetNZ

For Connection to the .nz Registry.

Please complete the attached contact form and the details below.		
I affirm that Domain Name Commission has approved the organisation as an Authorised Registrar.		No
I understand that InternetNZ will require demonstration of ability to use the registry system.		10
For NZ based registrars: I have attached NZ bank account details ar form for a <u>direct debit</u>	nd authorisation Yes / N	10
For foreign registrars: I would like details on the nominated Internet account that InternetNZ operate.	:NZ bank Yes / N	10
I agree to report any material issue, technical or non technical, in a time InternetNZ with regard to the registry system.	nely manner to Yes / N	10
I have attached two signed copies of the <u>.nz Connection agreement</u>	Yes/N	10
A soft copy of the Registrar Public Encryption Key or CSR has been sent to registry@Internetnz.net.nz as an attachment.		ИO
I have read and understood the <u>InternetNZ Technical Statement</u> .	Yes/N	10
Signed for and on behalf of [name of Registrar]		
(insert name of person signing)	(Date)	
(Position)		
Please send a signed copy to:		
registry@internetnz.net.nz or		
InternetNZ		

PO Box 11881 Wellington 6142 New Zealand

Registrar Contact Details		
Formal name of Registrar's legal entity		
Registrar Trading Name (if different to above, the trading name of the registrar)		
URL (the registrar's web address)		
Contact details about a Registrar that will b names under the registrar	e displayed in the public WHOIS queries for domain	
Registrar Trading Name		
Address Line 1		
Address Line 2 (optional)		
City		
Province (optional)		
Country Code		
Post Code (optional)		
Phone (+ xx xxx xxxxxxxxxxxxxxxxxxxxxxxxxxxx		
Email Address		
Default Domain Technical Contact/Handle Details (Note: these contact details will be used automatically by the SRS as a default for a domain name that has no technical contact details supplied)		
Name		
Address Line 1		
Address Line 2 (optional)		
City		
Province (optional)		
Country Code		
Post Code (optional)		
Phone: (+ xx xxx xxxxxxx)		
Email Address		

Contact details to be used by InternetNZ Support for assisting the registrar with connecting to the SRS and for day to day technical support issues.		
Name of main technical contact		
Address Line 1		
Address Line 2 (optional)		
City		
Province (optional)		
Country Code		
Post Code (optional)		
Phone: (+ xx xxx xxxxxxx)		
Email Address		
Email Address for receiving SRS Test refresh notifications with details of test domains		
Contact details used by InternetNZ Accoun	ts for invoicing the Registrar)	
Name		
Address Line 1		
Address Line 2 (optional)		
City		
Province (optional)		
Country Code		
Post Code (optional)		
Phone: (+ xx xxx xxxxxxxx)		
Email Address (s)		