Application for Membership

I hereby apply for membership with the Independent Pinto Horse Society Inc (IPHS Inc) and agree to abide and be bound by the constitution and all rules & regulations for the time being in force and all by laws thereafter. I agree to maintain membership for the purpose of exhibiting my registered IPHS stock.

☐ **Adult** ☐ **Family** ☐ **Junior** ☐ **Associate**

Name:_____

Stud Name (if applicable): _____

Postal Address: _____

Suburb:_____ State:_____ Post Code:_____

Phone: (___) _____ Email:_____

Payments made to IPHS Inc are considered 'pending' until applications have been approved - upon any rejection the Secretary will ensure fees paid by the unsuccessful applicant shall be refunded

Signature:_____ **Date:** _ _/_ _/_ _ _ _

Family Membership:

(Being a family consisting of 2 Adults and their children up to and including 17 years of age)

Adult 1:_____ Adult 2: _____

Child:_____ D.O.B: _ _/_ _/_ _ _ _ Junior Card Required ☐

Child:_____ D.O.B: _ _/_ _/_ _ _ _ Junior Card Required ☐

Child:_____ D.O.B: _ _/_ _/_____ Junior Card Required ☐

Please tick box if child/children will be showing as Junior Members as they will be issued their own card

Payments made to IPHS Inc are considered 'pending' until applications have been approved - upon any rejection the Secretary will ensure fees paid by the unsuccessful applicant shall be refunded within 14 days of the meeting.

Signature:_____ **Signature**:_____ **Date:** _ _/_ _/_ _ _ _

(Adult 1) (Adult 2)

Membership Fees

Adult:	$55.00
Family:	$75.00
Junior:	$45.00
Associate:	$45.00

Payment Details

Bank Transfer
PayPal
Cheque
Cash

Send To

The Secretary, IPHS Inc
PO Box 457
Beaudesert Q 4285
IPHS_pintos@outlook.com

OFFICE USE ONLY

Processed By: _____
Processed Date: _____
Receipt #: _____
Membership # _____

PLEASE ATTACH WORK ORDER FORM