



Application for Membership 2025

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 purposes of exhibiting my registered IPHS stock.

Adult
 Family
 Junior
 Associate

Name: _____

Stud Name (if applicable): _____

Address: _____

Suburb: _____ State: _____ Post Code: _____

Phone: () _____ Email: _____

Payments made to the 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 consist 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 the 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: \$45.00
 Family: \$60.00
 Junior: \$35.00
 Associate: \$35.00

Payment Details

Bank Transfer
 PayPal
 Cheque
 Cash

Post To

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

OFFICE USE ONLY

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

PLEASE ATTACH WORK ORDER FORM