



Application for Membership 2026

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: \$50.00
Family: \$65.00
Junior: \$40.00
Associate: \$40.00

Payment Details

Bank Transfer
PayPal
Cheque
Cash

Send To

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

OFFICE USE ONLY

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

PLEASE ATTACH WORK ORDER FORM