



West Australian Arabian Horse Association (Inc) 2017 Membership Application



NEW MEMBERSHIP

RENEWAL

(Please tick appropriate box)

Associate Member \$15 (eBlast/Newsletter only)

Junior Member \$30 (Must be under 18yrs @ 01/01/2017)

General Member \$50

| | | | |
|---|--|--|------------------|
| Surname <small>(include an AHSA Liability form with membership form)</small> | | First name | |
| Postal Address | | | Postcode: |
| Telephone (home) | | Telephone (mobile) | |
| Email Address <small>(please print clearly)</small> | | Junior DOB: <small>(include copy of birth certificate)</small> | |
| AHSA membership Number | | WAAHA membership Number (if known) | |

Family/Joint Member \$60

Consist of Adults, and/or their children. Joint membership shall consist of owners of registered horses in joint names. There is one voting member per membership.

Please list family members/owner details below:

| | | | |
|---|------------------|--|--|
| Membership Name | | | |
| Postal Address <small>(of voting member)</small> | | | Postcode: |
| Telephone (home) <small>(of voting member)</small> | | Telephone (mobile) <small>(of voting member)</small> | |
| AHSA membership (of voting member) | | WAAHA membership (if known) | |
| Members covered under this membership **Voting member first <small>(include an AHSA Liability form for everyone listed)</small> | Full name | Email address <small>(please print clearly)</small> | Junior DOB <small>(include copy of BC)</small> |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

I/we _____, agree to abide by the Rules, Regulations and Constitution of the Western Australian Arabian Horse Association (inc).

Signature (Parent or Guardian if under 18yrs): _____

Method of Payment:

Direct Credit: Western Australian Arabian Horse Association Inc, BSB 306 041 Account 4198099

Bank Cheque/Money Order (made payable to): Western Australian Arabian Horse Association

Please complete & return by post or email to: WAAHA Treasurer, 196 Bushmead Rd, Hazelmere 6055; treasurer@waaha.com.au

**** Please ensure an AHSA Liability form is included for ALL members listed on this form.**