



## **MEMBERSHIP APPLICATION**

## **ANNEX A TO PART 2**

Surname	
Salutation (Mr Ms Mrs Dr etc)	
Given Names	
Residential / Stud Address (PO Box is not acceptable)	
Postal Address	
Email Address	
Contact Telephone Numbers	Home Business Mobile
<ul><li>☐ Ordinary Membership (see Rule 3 (2))</li><li>☐ Associate Membership (see Rule 3 (6))</li></ul>	subscription \$100.00 subscription \$50.00
As an applicant(s) for membership I/we apply to become member(s) of the Percheron Horse Breeders Assoc. of Aust. Inc. and agree to abide by the rules and regulations of the PHBAA Inc.	
SIGNED:	DATE:
Proposed by: Ordinary Member Name:	
Seconded by: Ordinary Member Name:	
Return completed form to	Email secretary@percheron.com.au
	Post The Secretary PHBAA Margaret Watson "Cathclair" 710 Black Camp Rd, Cambra via Dungog, NSW 2420
Enquires	02 49923688 0455110416
Payment	Following receipt of this completed form by the Secretary, a tax invoice will then be issued and payment can then be made by

www.percheron.com.au