



APPLICATION FOR NEW MEMBERSHIP
2016 to 2017 Season

Auckland Miniature Horse Club Inc

Please tick the appropriate membership choice and send with your payment to:

Margaret Miles– The Secretary
Auckland Miniature Horse Club Inc
22 Merewhira Road, RD3 Albany , AUCKLAND 0793

JOINING FEE	Nil	
FULL MEMBER – 18 years and over who resides in Region 1 as defined by the NZMHA and owns or leases a horse registered with NZMHA	\$30.00	
FULL FAMILY MEMBERSHIP – Two or less adults and their dependent children residing in Region 1 as defined by NZMHA. Adults to own or lease a horse registered with NZMHA.	\$40.00	
ASSOCIATE MEMBER – Any persons not residing in Region 1 or not owning or leasing a horse registered with NZMHA. NO VOTE	\$30.00	
ASSOCIATE FAMILY MEMBERSHIP – Two or less adults and their dependent children not residing in Region 1 as defined by NZMHA or not owning or leasing a horse registered with NZMHA. NO VOTE	\$40.00	
JUNIOR MEMBER – 17 years and under. NO VOTE	\$10.00	
BREEDERS LISTING – on www.amhc.co.nz	\$10.00	
ALL MEMBERSHIP FEES ARE DUE BY 1 OCTOBER EACH YEAR If joining past 1 May then the membership fees for that season are halved	TOTAL	\$

- Paid by Internet Banking (Account number 38 9015 0249117 00, reference your name and membership)
- Cheque attached

I / We Mr / Mrs / Miss / Ms (full names of all members):

Address:

Phone:

Email: (please include as wherever possible information will be sent electronically)

Hereby apply to be member(s) of the Auckland Miniature Horse Club Inc (AMHC)

Names of horse(s) registered with NZMHA:

Registration Number(s):

I / We agree that if this application is accepted and approved I / We will abide by all the terms and regulations set forth in the Articles and Rules of the AMHC, and any amendments made thereto. I acknowledge the information provided to the Auckland Miniature Horse Club Inc on this form may be used for any official publication.

Signed: Date:

SPONSORSHIP (must be signed by a full member of AMHC)

I, (print name) Signature:
 being a full member of AMHC recommend this person(s) for membership to AMHC.