

## EARLY BIRD

# MEMBERSHIP SUBSCRIPTION - Year: \_\_\_\_\_

Early bird memberships will run from the 1st May 2024 until the 31st May 2024, 1st June 2024 normal membership fees applies.

Name/s: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Previous PHANZ Member/s YES NO Previous Membership Number: \_\_\_\_\_

I/We hereby make application for (please tick one):

**Adult Membership** (for one person only) \$65

**Family Membership** includes newsletter (Two adults & two Children only) \$140  
Please ensure the names of all parties to the membership are listed and the name & date of birth for each youth member is advised. Extra child \$20.

Name & DOB: \_\_\_\_\_ Name & DOB: \_\_\_\_\_

**Life Membership** (per person) \$1,000  
please also tick if an honorary member or previously paid up as a life member and cross out fee, this is for recording purposes only.

**Youth** (18 yrs & under) Date of Birth: \$25

Do you currently own and stand a PHANZ registered and classified stallion? YES NO

If do, Would you like to be contacted to have ad put in newsletter and on website? YES NO

I am an Amateur Owner YES NO Amateur No: \_\_\_\_\_

I/We agree that my/our contact details can be made available to other members of the Association YES NO  
(This is often for contact on horses bred or sold by you in the past.)

### PHANZ Bank Account: Westpac 03-0474-0456501-00

Please print clearly – In case of family subscription state all names.

I/We agree to abide by the rules of The Paint Horses Association of New Zealand (Inc).

Signed: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Full Name of Parent/Guardian: \_\_\_\_\_

(If this application is for an for a Youth, it must be signed by the Parent or Guardian of the Youth applying for membership rights)

OFFICE USE ONLY:

DATE RECEIVED: \_\_\_\_/\_\_\_\_/\_\_\_\_

MEMBERSHIP NUMBER ADVISED: \_\_\_\_/\_\_\_\_/\_\_\_\_