

Goulburn Valley Quarter Horse and Western Riding Club Inc.

PO Box 288, TATURA, Victoria 3616

MEMBERSHIP APPLICATION

1st March 2015 to 28th February 2016

Family
\$60

Single
\$35

Youth
\$25

NEW

RENEWAL

Name: _____
Address: _____
Phone H: _____ W) _____ M) _____
Email Address: _____
Youth Names and Date of Birth: _____

If you are a member of a Breed Association (e.g.: AQHA, PHAA, AAA) please state Association membership Number/s: _____
I hereby apply for membership of the GVQH&WRC Inc. and in the event of my admission as a member and I agree to be bound by the Rules of the Association for the time being in force.
Signature: _____ Date: ____/____/____

Emergency Contact and Medical Information

Name: _____
Phone Number: _____ Relationship: _____
Doctor's Name: _____
Surgery Location: _____ Phone: _____
Medical Insurance: Yes / No Company: _____
Ambulance Subscription Member Yes / No

I, _____ a member of the GVQH&WRC Inc.,
(Name of Proposer)

nominate the above applicant who is personally known to me, for membership of the GVQH&WRC Inc.

(Signature of Proposer) Date: ____/____/____

I, _____ a member of the GVQH&WRC Inc.,
(Name of Seconder)

Second the nomination of the applicant who is personally known to me, for membership of the GVQH&WRC Inc.

(Signature of Seconder) Date: ____/____/____