



# NATIONAL BUCKSKIN SOCIETY (INC)

2009/2010

## MEMBERSHIP APPLICATION FORM

1<sup>st</sup> JULY 2009 - 30<sup>th</sup> JUNE 2010

**Please Note**-Members must have NBS Inc Registered horses to be eligible to Compete in NBS Inc Buckskin Classes at Shows

Please PLACE AN (X) IN THE BOX BESIDE the appropriate level of membership

| (X) |   | ONE PERSON                                     | (X) | TWO PERSONS   | (X) |
|-----|---|--|-----|---------------|-----|
|     | NEW MEMBERSHIP  | SINGLE \$60.00                                 |     | JOINT \$65.00 |     |
|     | ANNUAL MEMBERSHIP RENEWAL   | SINGLE \$50.00                                 |     | JOINT \$55.00 |     |
|     | LATE FEE ( applies after 31 <sup>st</sup> July )  | \$10.00  |     |               |     |
|     | ADDITIONAL INS. COVERAGE  | \$5.00 PER PERSON ( list extra persons below ) |     |               |     |
|     | ASSOCIATE MEMBER Has no voting rights. Not eligible to register, foal record or transfer a horse with the society | \$30.00  |     |               |     |

**\*Please note: Annual Membership Renewal NOT PAID by 31<sup>st</sup> JULY 2009 will incur the \$10.00 LATE FEE.**

Please complete remaining details below and return to:  
Membership Co-ordinator:

Sue Emeny, 2939 Warburton Hwy, Wesburn Vic 3799  
Cheques made payable to the National Buckskin Society (Inc.)

MEMBERSHIP NAME \_\_\_\_\_

NOMINEE SURNAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

NOMINEE - RECEIVES ALL CORRESPONDANCE, SIGNS ALL RELEVANT DOCUMENTATION & HAS THE VOTING RIGHT

ADDRESS \_\_\_\_\_

\_\_\_\_\_ P/CODE \_\_\_\_\_ PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_ @ \_\_\_\_\_

SIGNATURE \_\_\_\_\_

PLEASE LIST EXTRA PERSONS BELOW AND INCLUDE \$ 5.00 EACH WITH YOUR REMITTANCE (refer information sheet P.T.O.)

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

4. \_\_\_\_\_ 5. \_\_\_\_\_ 6. \_\_\_\_\_

### OFFICE USE ONLY

Date Received: \_\_\_/\_\_\_/ 2009/2010 Receipt No: \_\_\_\_\_ Amount \$ \_\_\_\_\_

Cheque No \_\_\_\_\_ Money Order No \_\_\_\_\_

Received By (committee PLS PRINT): \_\_\_\_\_ NBS Inc FORM 101