



APPLICATION FOR MEMBERSHIP

I / We: _____

Please print (Surname / Partnership / Company) (First names in case of Company-nominee)

Wish to become a: BREEDER / NON BREEDER Member. (Delete option not applicable)

And agree to abide by the Rules and Bylaws of the Society.

Address (residential): _____ Address (postal, if different): _____

Phone numbers:\ _____ Email: _____

Signed (by all persons wishing to be included in the membership):

 _____ Date: _____

AHB Herd Number: _____

MEMBERSHIP FEES

Breeder: **\$195.50** (GST Incl.) (Includes new herd fee of \$57.50) **Total: \$** _____

Non-Breeder: **\$ 34.50** (GST Incl.)

(The appropriate fee must accompany this application either by cheque or internet banking)

FOR BREEDER MEMBERS ONLY

I / We, the applicant as indicated above wish to apply to register the herd name of: _____
 to be used as a prefix.

I / We, breed: BELTED / WHITE / STANDARD Galloway (Delete option/s not applicable)

I / We will be the legal owners of all animals registered to or transferred to that herd.
 If any other person (e.g. Manager) is authorised to act on behalf of the above registered herd please indicate below:

Name and Address:\ _____

Signed: _____ Date: _____

NOTES:

1. The new herd fee covers registration of herd name (it must be unique), herd abbreviation and herd number.
 2. The application will be considered by Council and you will be notified within the month.
 3. Where the application for membership includes more than one person, each person must be listed and each person must sign the application.
- Please indicate if you DO NOT wish to have your details published in the Members List on the Society website.
 - Email Post - Please indicate your preference for the receiving the "Galloway Gazette".

Return to Secretary when complete.

Cheque Enclosed. Amount \$.....

Internet Banking. Amount \$..... 03-0399-0646080-000 (please use **New Member** in code & include your **Name** in reference)

Karen Futter Secretary & Councillor