

APPLICATION FOR PREFIX OR STUD NAME

FEE \$75.00

MEMBER NAME(S): MEMB NO.:

ADDRESS:

TOWN: STATE: POSTCODE:

TELEPHONE: MOBILE:

EMAIL:

I/We apply for the name:

(Please also briefly explain reason for choice - e.g. registered business name / stud name etc.)

1st preference:

Reason

2nd preference:

Reason

as our Prefix with the Paint Horse Association of Australia.

Signature: Date:

Signature: Date:

(Both signatures required for constituent or Family membership)

PAYMENT I enclose cheque / money order / credit card details for \$

Visa / MasterCard (Please Circle) Card No ____ / ____ / ____ / ____

Name on Card: Expiry Date __ / __

Please note – Credit card payments will attract a 2.00% Merchant fee.

Signature: Date:

OFFICE USE ONLY

RECEIPT NO.: DATE: