



# **CLYDESDALE HORSE SOCIETY OF NEW ZEALAND (INC)**

Please send to: The Secretary  
Paul Stroobant, 173 Inland Road, RD 2, Helensville 0875

## **MEMBERSHIP APPLICATION FORM**

I hereby apply to the Council under Rule 6 to become a Member of the Clydesdale Horse Society of New Zealand (Inc). I agree to support the Objects and observe the Rules as published from time to time.

*Please print details clearly:*

**NAME:**

**POSTAL ADDRESS:**

**TELEPHONE NUMBER:**

**FAX NUMBER:**

**E-MAIL ADDRESS:**

**SIGNATURE:**

**PROPOSED BY:**

(Financial member of the Society)

**SIGNATURE:**

**DATE:**

**SUBSCRIPTION ENCLOSED:**

(Annual \$50, Life \$750)