



LUSITANO HORSE ASSOCIATION OF AUSTRALASIA

MEMBERSHIP FORM

Membership is from 1st January until 31st December

I wish to join / renew my Full / Associate Membership.

Please circle the one which is applicable

Mrs/Mr/Miss/Ms

Or Stud Name

Address:

.....

..... State: Postcode:

Tel: Home: Work:

Fax: Email:

- I enclose (tick as applicable) Full Membership fee of \$75
 Associate Membership fee of \$45
 Initial Joining fee (new members only) of \$25

In requesting / renewing membership, I agree to be bound by the Constitution and Rules of the Lusitano Horse Association of Australasia Incorporated

Signed:

Please print name:

Date:

Please return to: The Secretary
L.H.A.A.
PO Box 1857
Bowral NSW 2576
Australia