

MEMBERSHIP APPLICATION FORM



I HEREBY WISH TO APPLY FOR THE FOLLOWING MEMBERSHIP: (PLEASE TICK)

Full Breeding Associate Youth Overseas

TITLE **NAME**

ADDRESS

POST CODE

NAIT NUMBER

PHONE

MOBILE

EMAIL

- a) I hereby agree to abide by the rules, regulations and by-laws of the NZ Beef Shorthorn Association (Inc)
b) I consent to the above nomination and to the Association including my name and address in any published list, or providing my name and address as a member to third parties should the secretary so determine.

SIGNED *New Member*

SIGNED *Nominating Member*

If **Full Membership** is applied for, the following should also be completed:

I wish to apply to the New Zealand Beef Shorthorn Association (Inc) Council for the registration of a Herd Prefix, should my above membership nomination be acceptable. Listed below are three selected prefixes in order of preference:

1st Choice

2nd Choice

3rd Choice

Membership Fees

Full Membership Annual Subscription \$172.50 including GST

Associate / Commercial Annual Subscription \$34.50 including GST

Overseas Annual Subscription \$115.00 including GST

Youth Annual Subscription \$34.50 including GST

If applying for Youth membership, please state date of birth:

Please return this completed form to:

New Zealand Shorthorn Association | PO Box 503, Feilding 4740

Ph: 06 323 4484 E: info@pbbnz.com www.shorthorn.co.nz