



ABN 22 921 298 546  
ARBN 096 500 346

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**MEMBERSHIP APPLICATION & MEMBERSHIP RENEWAL FORM**

**All Applications are subject to approval by the National Committee of Management of MHAA**

Complete Pages 1 and 2 and post with correct fees, to the Office, PO Box 454 Drouin, Victoria 3818

PLEASE PRINT CLEARLY IN BLOCK LETTERS

I/We \_\_\_\_\_

Full name of applicants

Nominee for Membership \_\_\_\_\_ (Required for Family, Joint & School Membership)

Names included in Family Membership (Note DOB if Junior or Youth \_\_\_\_\_)

Address \_\_\_\_\_ Post Code \_\_\_\_\_

Postal Address (if different from above) \_\_\_\_\_ Post Code \_\_\_\_\_

Phone \_\_\_\_\_ Mobile \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Website \_\_\_\_\_

Tick if you do **NOT** wish to receive a copy of our Email Newsletter "E-News"

Tick if you do **NOT** wish your name to be published in the 'Welcome to New Members in 'Fine Lines'

Please tick category of Membership applying for:  Tick if Renewing Membership Number if renewing

**FULL MEMBERSHIP**

(One Vote)

**JOINT MEMBERSHIP**

(Two Adults – One Vote Only)

**HANDLER MEMBERSHIP**

(Non-Horse Owner)  
(No Voting Privileges)

**FAMILY MEMBERSHIP**  **YOUTH MEMBERSHIP D.O.B.** \_\_\_\_ / \_\_\_\_ / \_\_\_\_  **OVERSEAS MEMBERSHIP**

Nominated Member, his/her life Partner, their children, aged up to & including 17 years of age, as at 31 July. Grandchildren not included.

(One Vote Only- nominated Member)

Youth up to & including 17 years of age, as at 31 July  
(No Voting Privileges)

(Horse Owner – One Vote)  
(Non Horse Owner – No Voting privileges)

\*\*\* KINDLY NOTE: OVERSEAS FEE SHOULD BE ADDED TO RELEVANT MEMBERSHIP TYPE

**SYNDICATES / PARTNERSHIPS**  **SCHOOL MEMBERSHIP** D.O.B.(if Youth) \_\_\_\_ / \_\_\_\_ / \_\_\_\_

(No Voting privileges)

(School Nominated Representative: Horse Owner - One Vote – if over 18 years)  
( Non-Horse Owner – No Voting privileges)

Please nominate whether your horses are in a Derived Membership

**KINDLY NOTE: Members of Syndicates / Partnerships under a Derived Membership MUST be individual Members.**

**DERIVED MEMBERSHIP APPLICATION FORM MUST BE COMPLETED & SUBMITTED WITH THIS FORM**

STUD PREFIX (if applicable) \_\_\_\_\_

REGISTERED BRAND (if applicable) Worded Description \_\_\_\_\_

**NOTE:** Prefix and Registered Brand MUST be registered with The Miniature Horse Association of Australia Inc, **before** any foals can be eligible for registration.



Show diagram of intended brand  
Please draw in DARK BLACK PEN

**Please continue to Page 2 of the Membership Application & Membership Renewal Form**



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**MINIATURE HORSE ASSOCIATION OF AUSTRALIA INC**

**MEMBERSHIP APPLICATION & MEMBERSHIP RENEWAL FORM**



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**Page 2 of 2**

**THIS MEMBERSHIP APPLICATION AND MEMBERSHIP RENEWAL FORM PAGE 2, PAYMENT SECTION, MUST ACCOMPANY PAGE 1 AND BE SENT WITH YOUR PAYMENT TO THE OFFICE, PO BOX 454, DROUIN, VICTORIA, 3818.**

**If you have any queries with regards this form and/or fees payable, please email [admin@mhaa.com.au](mailto:admin@mhaa.com.au) or contact the Registrar.**

	<b>FEES PAYABLE</b> (Please complete)	<b>QTY</b>	<b>Price</b>	<b>Total</b>
(0000)	JOINING FEE <i>is a one time fee, payable by ALL NEW MEMBERS (except youth)</i>			
(0000A)	REJOINING FEE <i>members not renewing their membership by Oct 31st each year</i>			
(0002)	FULL MEMBERSHIP			
(0003)	FAMILY MEMBERSHIP			
(0003A)	JOINT MEMBERSHIP			
(0003B)	DERIVED MEMBERSHIP <i>Add to full membership: Initial set up fee per member</i>			
(0003C)	DERIVED MEMBERSHIP <i>Annual Fee for derived membership (Not per member)</i>			
(0005)	YOUTH MEMBERSHIP			
(0005A)	YOUTH MEMBERSHIP INCLUDING FINELINES			
(0006)	HANDLER MEMBERSHIP <i>Add Joining fee if this is a new application</i>			
(0007A)	OVERSEAS MEMBERSHIP <i>Add overseas fee to relevant Membership type. AUS \$</i>			
(0014)	SCHOOL MEMBERSHIP			
(0008)	STUD PREFIX REGISTRATION FEE			
(0009)	BRAND REGISTRATION FEE			
	<b>NEW MEMBERS: If joining on or after 1 February pay half relevant Membership Fee If joining on or after 1 June, current to 31 July in following year BOTH PAY FULL JOINING FEE</b>		<b>TOTAL FEES</b>	

**Payment Method:**

Cheque  Money Order  Credit Card

**AMOUNT PAYABLE:** \$ \_\_\_\_\_

**"I authorize the above amount or any handling fees incurred to be charged to my Credit Card":**

**Credit Card Type:** \_\_\_\_\_ **Name on Card:** \_\_\_\_\_

**Credit Card Number:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **Expiry Date:** \_\_\_\_\_ / \_\_\_\_\_

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**CHECK LIST: TO AVOID A HANDLING OR MORE INFORMATION FEE, PLEASE ENSURE THAT YOU HAVE:**

- \*\*\* Ticked appropriate boxes
- \*\*\* Added D.O.B. where necessary
- \*\*\* Completed Fees Payable and Payment Method section
- \*\*\* Have Application / Declaration signed by ALL Applicants
- \*\*\* PRINTED CLEARLY IN BLOCK LETTERS

**APPLICATION FORMS INCORRECTLY COMPLETED, WITH INCORRECT FEES ATTACHED, OR ILEGIBLE, WILL NOT BE PROCESSED**

**Declaration:** I/We hereby apply to become a Member/s of the Miniature Horse Association of Australia Inc. I/We agree that if the Application is accepted and approved I/we will abide by all the Articles, Rules & Regulations, as set down in the Constitution, General Rules & Regulations, Including Appendix 1, Appendix 2 and the Show Rules of the Miniature Horse Association of Australia Inc, including any amendments made thereto. In signing the Application, I/We understand that I/we am/are personally responsible for the information submitted and also understand that in the event said information is determined to be fraudulent, I/we am/are subject to penalty and/or loss of Membership and all fees submitted. I/we acknowledge that the Miniature Horse Association of Australia Inc reserves the right and hereby consent to the re-distribution of all or part of the above information, by the Association or any other entity/entities or person/s in order to achieve its objections as defined in the Constitution. Further, when attending any event, I/We acknowledge that I/we are responsible for any non Member accompanying me/us and are also aware and have made those accompanying me/us aware that equine sports have the potential to be dangerous and accept that while every effort will be made with regard to safety, I/we and those persons accompanying me/us, will not hold the Miniature Horse Association of Australia Inc responsible for any damage, loss or injury incurred.

Signed: \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Signed: \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

(if applicant is 17years of age or under, signature of Parent or Guardian required. School Membership nominee to sign (if 18). Full, Associate, Family, Joint, ALL sign.