



# Membership Application Form for:

Buckskins, Palomino, Double Dilute, Sub Registry  
(Insert Year)

Secretary: 34 Lonah Road  
Staverton TAS 7306  
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E: melreid@southcom.com.au

I wish to make an application for membership with the Tasmanian Buckskins Inc. I am aware that that to have PERSONAL LIABILITY INSURANCE I need to pay the extra amount stated over page & it is only current until Dec of the current financial year  
(please tick appropriate box) (Admin fee is for AHSA)

- Individual Membership \$50
- Family/ Constituent or Stud Membership \$60 (+ \$5 per person Admin fee, list below all names to be included)  
(this includes One voting right per membership, please state nominated person below)
- Associate Membership \$10 (does not include any rego, showing, breeding, rights.  
Only copies of 1/4 ly newsletter)

Please fill in both pages of this form & send Cheque/Money Order to above address. For your convenience we also accept Direct Deposit Account Name: Tasmanian Buckskins Inc. BSB No:037-012 Account no:130020. Leave your Name as reference. Send in copy of bank receipt number with your completed paperwork.

I agree to the conditions of membership of Tas Buckskins Inc & agree to abide by their constitution at all times.

Stud/Family/Constituent Name: .....

Contact Name (this name will appear on all documentation, registrations etc): .....

Address:.....

..... P/C.....

Ph: ( )..... Mob:.....

Email:.....

Names to be included in membership (for Stud/family etc)

1..... Age:.....

2..... Age.....

3..... Age.....

Signature:..... Date:...../...../.....

Office Use only:  
Received:...../...../..... Membership Number: T.....

**PUBLIC LIABILITY INSURANCE COVER (please tick one box)**

*Tas Buckskins Inc* has insurance cover available through the *Arabian Horse Society Australia*. Members of *TBI* who wish to take out this optional cover may do so & will then have their own Public Liability Cover & be *covered at any event run by an AHSA Affiliate or Ag show which holds classes for other breeds or any other show which includes classes as previously stated*. (Ph 1800 806 493 for more info)

**\*\* PLEASE TICK THE APPROPRIATE BOX BELOW \*\***

- I wish to pay the additional **\$30 per person** for Public Liability Insurance through AHSA which will be current from **1st Jan —31st Dec**
- I am a financial member of AHSA & am covered for PLI
- I have my own P/Liability Insurance or do not wish to take out coverage

Please fill in if you wish to take out the optional Insurance. This will be forwarded on to the AHSA & you will receive approval in mail.

Name:..... D.O.B:...../...../.....

Address:.....

..... STATE:..... P/C.....

Phone:(hm) (.....) ..... (wk) (.....) .....

Mobile..... email:.....

I have enclosed a separate cheque made payable to **ARABIAN HORSE SOCIETY LIMITED OF AUSTRALIA** for: \$..... (\$30 per person), for Tas Buckskins Inc to forward on. I am aware that this PUBLIC LIABILITY INSURANCE is current until Dec 31st in the current year

Signature:..... Date:...../...../.....