



AUSTRALIAN MINIATURE HORSE & PONY REGISTRY MEMBERSHIP APPLICATION

CATEGORIES: (Circle One)

ADULT PARTNERSHIP FAMILY YOUTH

NAME/S OF APPLICANT/S:

Include full name of **all** Applicant/s, Individual, Partnership, Family & Youth (must be under 18, include DOB) _____/_____/_____

- 1. _____ 2. _____
- 3. _____ 4. _____
- 5. _____ 6. _____

ADDRESS _____

POST CODE _____

PHONE _____ **EMAIL** _____

In signing this renewal, I/we agree that I/we am/are personally responsible for the information submitted, and also understand that in the event, said information is determined to be inaccurate or fraudulent, I/we am/are subject to penalty and/or loss of membership and all fee's submitted. I/We agree to abide by the rules of the **Australian Miniature Horse & Pony Registry**.

SIGNED _____ **DATED** _____

STUD PREFIX/S: (Circle One) APPLICATION FOR A NEW PREFIX MY EXISTING PREFIX/S ARE

If applying for a new prefix you may submit, in order of preference, more than one option, the **AMR*** will select the first available option.

- 1 _____ 2 _____
- 3 _____ 4 _____

BRAND/S:

Worded Description _____



Show diagram of Brand

NOTE: Brands & Prefixes registered with AMR will be recorded On Line

NOTE: MEMBERSHIP FEE PLUS JOINING FEE ARE PAYABLE IF NOT PREVIOUSLY AN AMR MEMBER
NOTE: MEMBERSHIPS ARE DUE ON OR BEFORE 1st of JULY. IF JOINING JANURARY TO MARCH ½
MEMBERSHIP FEE APPLIES IF JOINING APRIL TO JUNE ¼ MEMBERSHIP FEE APPLIES

COMPLETE THIS FORM AND FORWARD TO THE AMR* ACCOMPANIED BY A CUSTOMER WORK ORDER AND THE CORRECT FEES