



QLD Working Cow Horse Club Inc.
 P.O. Box 10
 Narangba Q 4504

2020 Membership Application Form

(1st January - 31st December)

- \$50 Individual
- \$70 Family
- \$25 Youth
- \$15 Non-Rider
- \$15 Day/Event Membership

APPLICANT'S NAME:

Please List names under your Family Membership

Please provide date of birth for youth

NAMES		D.O.B.
1		
2		
3		
4		
5		
6		

ADDRESS: _____

HOME PH: _____ **MOBILE:** _____

EMAIL: _____ @ _____

I/We hereby agree to abide by the rules of the Queensland Working Cow Horse Club Inc:

Signed: _____ Dated: / /20

Guardian/Parent: _____ Dated: / /20
(if under 18)

Cheques made payable to **QWCHC**

Direct Deposit: **BSB: 014-740** Account # **497 268 458** (Use **Surname** as reference)

Return to Email: bourne121@outlook.com