

MEMBER ANNUAL STUD RETURN 2010 / 2011

TO BE RETURNED TO THE ARABIAN HORSE SOCIETY OF AUSTRALIA LIMITED
Locked Bag No. 6, Windsor, N.S.W. 2756
TELEPHONE (02) 4577 5366

ABN 12 001 281 590

\$55 LATE FEE REQUIRED IF RETURNED AFTER 1ST AUGUST 2011
NO FEES APPLY IF RETURNED BEFORE 31ST JULY 2011

TO COMPLETE ONLINE - LOG ON TO www.ahsa.asn.au

**PLEASE COMPLETE ACKNOWLEDGEMENT OF RECEIPT ON PAGE 4 & SUBMIT
WITH STAMPED ADDRESSED ENVELOPE**

- Members are responsible for recording details of all ARABIAN & ARABIAN BRED horses either Owned or Leased by the Member (from another party).
- Please complete the Stud Return for **ALL ARABIAN & ARABIAN BRED MARES** which have been served.
- List all **NON-ARABIAN MARES** which have been served **BY ARABIAN REGISTERED STALLIONS.**

***PLEASE USE A SEPARATE FORM FOR EACH MEMBERSHIP**

Membership No..... Member Name:

Postal Address:

..... Postcode:

Telephone:(.....)..... Confidential Y / N

Fax No.: (.....)..... Mobile No.:Confidential Y / N

Email: Confidential Y / N

Is this a change of address for mail? Y / N

IF THIS IS A JOINT MEMBERSHIP would you like all horses recorded in the membership to be recorded as:

JOINT TENANTS: On the death of one Owner the remaining Owner(s) automatically acquire owner's share.

or **TENANTS IN COMMON:** In which case it passes by his / her will.

(Please tick box)

Stud Prefix (*only if recorded with A.H.S.A. for this membership*):

Brand: Please draw brand

Written description of Members Brand:

.....

Particulars in this return, to the best of my knowledge, are correct.

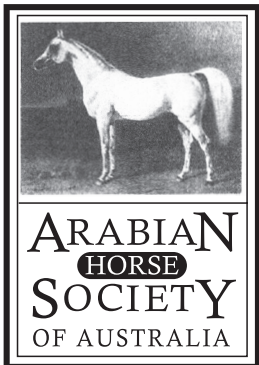
Signed Date:

REGISTERED HORSES WHICH HAVE DIED - (registration certificate not required).

NAME OF HORSE	REG. NO.	DATE DIED	CAUSE OF DEATH

REGISTERED STALLIONS / COLTS GELDED OR MARES SPAYED WHERE THE SOCIETY HAS NOT PREVIOUSLY BEEN NOTIFIED.
(RETURN REGISTRATION CERTIFICATE FOR AMENDMENT)

NAME OF HORSE	REG. NO.	DATE GELDED OR SPAYED



Please supply a **self addressed stamped envelope** and complete the following in order to obtain information of receipt of your 2010 / 11

Members Annual Stud Return:

Name: Membership No.:

Postal Address:

Office use only - Date received:
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