

GAUTENG HORSE SOCIETY

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Application to become an Affiliated Body / Approved Venue

I/we, the undersigned, being VOTING ADULT MEMBER/S OF GHS, AND OVER THE AGE OF 21, hereby apply for a venue to become an Affiliated Body/Approved Venue of Gauteng Horse Society (GHS), and enclose my/our annual subscription for the year ending 31 July 2010.

If accepted, I undertake to abide by the constitution and rules of the society.

DETAILS OF VENUE: Full Name of Affiliated Body:

VAT Registration number: _____

Postal Address: _____

Code: _____

Physical Address: _____

Code: _____

Province: _____ Region: _____

Work Tel: _____ Cell: _____

Fax: _____ E-mail: _____

DETAILS OF PERSON RESPONSIBLE: (Must be a participating member of GHS)

Full Name of Person Responsible:

_____ Title: _____

Designation: _____ ID Number: _____

Proprietor_____; Partnership_____; CC_____; PTY_____; Other_____

Cell: _____

Postal Address: _____

Code: _____

Physical Address: _____

Code: _____

Disciplines for which shows will be held:

