

Club or Organisation

Queensland Horse Council Inc.
ABN: 77 020 814 044
Membership Application/Renewal

- Small Club** (2-200 members. 2 delegates) **\$75**
- Medium Club** (200-2,000 members. 3 delegates) **\$150**
- Large Club** (over 2,000 members. 4 delegates) **\$300**

New Application: Renewal:

Club Name: _____

No. of Members: _____

Contact's Name: _____

Contact's Position: _____

Email: _____

Postal Address: _____

Phone: _____

Fax: _____

Signed: _____

Dated: _____

We will contact you for delegate details



Increase **HORSE POWER** join
the **QLD HORSE COUNCIL**

www.qldhorsecouncil.com

BENEFITS OF MEMBERSHIP

Individual/business membership ensures you:

- will be directly informed and consulted on industry issues,
- will be eligible for member discounts with partner organisations,
- will be eligible for discounts on QHC held educational events,
- will receive our regular email bulletin "eQuiNEWS",
- have marketing, networking and advertising opportunities via eQuiNEWS and our website.

Club/organisation membership provides your club/organisation with:

- information and consultation on industry issues via your delegates,
- our regular email bulletin "eQuiNEWS" and
- access to the information provided by the QHC Inc.

Your members will:

- be eligible for member discounts with partner organisations, and
- be eligible for discounts on QHC held educational events.

TO JOIN

Simply detach and complete the relevant membership application/renewal form and forward it together with your payment via one of the following options:

By Cheque/Money Order:

Make cheques payable to: The Queensland Horse Council Inc.

By EFT Payment:

Account Name: Queensland Horse Council Inc.
BSB Number: 034189
Account Number: 293366

Forward to:

By Mail to: QHC Treasurer
6 Pamplings Rd
Peak Crossing Qld 4306

Email (EFT only): treasurer@qldhorsecouncil.com

The Queensland Horse Council Inc holds \$10m Public Liability Insurance with CGU.

Individuals or Business

Queensland Horse Council Inc.
ABN: 77 020 814 044
Membership Application/Renewal

- Individual** **\$35**
- Business** **\$35**

New Application: Renewal:

Name: _____

Email: _____

Postal Address: _____

Phone: _____

Fax: _____

Signed: _____

Dated: _____



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