

PO Box 5620,
 Canning Vale South, WA 6155
 Email: secretary@afwhs.com.au
 ARN: 166 952 478
 IARN: A1015671D



APPLICATION

FOR

REGISTER A STUD

PREFIX/SUFFIX

See Page 2 for Application Conditions

DETAILS OF STUD OWNER/MEMBER		
Name:	AFWHS Member No.:	
Address:	State:	P/C:
Email:	Phone:	
Signature:	Date:	

DETAILS OF STUD		
Stud Name:	Stud Registered Business: (please circle) Yes No	
Stud Address:	State:	P/C:
Business Phone:	Business Fax:	
Business Email:		
Applying for: (please circle)	Prefix/Suffix	AND Full Name/Abbreviation
Proof Provided: (please circle and include with application)	Company Registration Form/Business Card/Website Details	
Stud Website: (if applicable)		

**Please enter three (3) options for your Stud Prefix/Suffix.
 If also providing details of your brand, please complete page 2.**

PREFIX/SUFFIX	
1st Preference	
2nd Preference	
3rd Preference	

PAYMENT DETAILS-	STUD PREFIX/SUFFIX APPLICATION FEE—\$35.00
Method of Payment: <input type="checkbox"/> Cheque or Money Order made payable to AFWHS Inc (post to address listed at top left of form) (please tick) <input type="checkbox"/> Direct Deposit (bank details below— please include your surname as reference— complete the details below and attach a copy of the receipt (your order may not be accepted without this receipt)	
Account Name: AUSTRALIAN FRIESIAN WARBLOOD HORSE SOCIETY INC BSB— 086 535 ACCOUNT—862499845	
Date of Deposit:	Reference Used: <input type="checkbox"/> Copy of Receipt Attached: <input type="checkbox"/>

Signed (Owner): _____	Date: _____
Print Name: _____	Membership Current: <u>Yes/No</u> (circle)

Please note that failure to complete the form accurately, which results in errors (due to inaccurate information being supplied on the form) will incur a fee of \$10 for a replacement Certificate. By signing above, you confirm that you have reviewed the details of this application and take responsibility for it's accuracy.

PREFIX/SUFFIX BRAND
Written brand description
Write or insert a picture of the brand below <i>(Alternately it can be emailed to secretary@afwhs.com.au)</i>

CONDITIONS FOR APPLYING FOR A STUD PREFIX/SUFFIX:

- You must be a current financial member of the Australian Friesian Warmblood Horse Society to apply to register a stud prefix/suffix.
- This form must be accompanied by payment via the methods listed on page 1. The nominated fee is listed with these details. This form and payment secure first option for your preferred Stud Prefix/Suffix name, and upon acceptance a Certificate will be issued.
- The prefix/suffix must be sufficiently unique and not closely resemble any other registered with the AFWHS Inc and it may be, either, the full prefix/suffix or an abbreviation. It is also recommended that prior to applying you ensure your choice of prefix/suffix is not already a registered business name in Australia—ASIC has a search facility for this purpose at www.search.asic.gov.au
- Should you wish to register and use, both, the full prefix/suffix and abbreviation, you must apply in two (2) separate forms and pay an additional fee
- Proof that you run a stud as a business must be provided in the form of your company registration form, a business card or details of your website.
- **The registration of a prefix/suffix relates to the registering of horses with the AFWHS Inc only and is not enforceable outside of our Society. It is recommended that you include a drawing of any brand you use but please note that due to the differing brand registration rules between states, we cannot reserve brands.** Providing your brand will assist us in our record keeping.
- Upon approval of your application, you will retain the right to use the prefix/suffix to the exclusion of others when registering horses with the AFWHS Inc whilst you remain a financial member of the Society, and for a grace period of six (6) months thereafter.

Note: Please contact the Secretary should you require any further information on completing this form or for more information about registering a Stud Prefix/Suffix—secretary@afwhs.com.au

OFFICE USE ONLY		
Date Received:	Paid on: by: Chq MO Direct	Receipt # Issued:
Date Certified:	By:	Signed: