

New Zealand Gypsy Cob Association

APPLICATION FOR MEMBERSHIP 1 AUGUST 2021 - 31 JULY 2022

Please note- your membership is not complete until the signed form is received by the association

Membership type: Please tick appropriate

Adult	Family	Youth	Life
Single	Up to two adults	Under 17 at 1	Single Adult
	and 3 youths	August 2020	
\$35	\$55	\$15	\$350

Nan	ne	Date of Birth (youth only)
Contact Details:-		
Address:		
Phone: Home	Mobile	2
Email:		
the collection of the above details by the NZGCA to retain, use and disclose and other agencies as required. I also for publicity purposes. I agree to my acknowledge my right to access and of	the NZGCA, for the purpose this information to Organizi agree to my bio data and sh name being published within correct this information. I agritution of the New Zealand O	ccordance with the NZ Privacy Act 1993 to of membership/competitor records and for ng Committees, Funding Agencies, Sponsors ow results/ records being used by the NZGCA a membership list on the NZGCA website. I see to comply with and be bound by the Gypsy Cob Association. I declare that all the
Signed:	Dat	te:

Direct credit/on-line payment to 03 1568 0431270 00 Please record your name and reason for payment. Please send membership forms to: secretary@nzgca.co.nz