1



**Arab Horse Society of South Africa   
Arabierperdgenootskap van Suid-Afrika**

PO Box /Posbus 506 Tel: (051) 4100 945

Henry St./Str. 118 Fax/Faks: 086 244 8582

BLOEMFONTEIN E-pos/[E-mail:](mailto:admin@arabhorse.co.za) admin@arabhorse.co.za 9300

**APPLICATION FOR MEMBERSHIP   
AANSOEK OM LIDMAATSKAP**

**I/WE - EK/ONS,**

1. **TITLE** (PROF., DR., MR., MRS., MISS)

**TITEL** (PROF., DR., MNR., MEV., MEJ) **/\_\_\_/\_\_\_/\_\_\_/\_\_\_/ ID NR / / / / / / / / / / / / / /**

1. **INITIALS / VOORLETTERS / / / / / /** / / (NAME/NAAM)
2. **SURNAME / VAN**

**/ / / / / / / / / / / / / / / / / / / / / / / / / / / / / / /**

1. **MEMBERSHIP NAME** (if not to be registered under surname or an individual)

**LIDMAATSKAP/STOET NAAM** (indien nie geregistreer moet word onder die van of as dit nie ‘n individu is nie)

**/ / / / / / / / / / / / / / / / / / / / / / / / / / / / / / /**

1. **ID. NOMMER (BK / TRUST / MAATSKAPPY) / / / / / / / / / / / / / /**

**BTW NOMMER / VAT NUMBER: / / / / / / / / / / / / / /**

**ADDRESS OF APPLICANT / ADRES VAN AANSOEKER**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. ADDRESS LINE 1 ADRESLYN 1 **/** 2. ADDRESS LINE 2 | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** |
| ADRESLYN 2 **/**  **/** |  | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** |
| 1. ADDRESS LINE 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ADRESLYN 3 **/**  **/** |  | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** |

**9 .** POSTAL CODE TELEPHONE NUMBER

POSKODE **/\_\_\_/\_\_\_/\_\_\_/\_\_\_/** TELEFOON NOMMER ( )(**\_\_\_\_\_\_**\_\_\_\_**\_\_\_\_\_\_\_\_\_\_**)

FAX CELL

FAKS: ( )( ) SEL**:**

2

**10.** E-MAIL ADDRESS:   
E-POS ADRES:

**11. LANGUAGE** IN WHICH CORRESPONDENCE IS REQUIRED:

**TAAL** WAARIN KORRESPONDENSIE VERLANG WORD: **AFRIKAANS /\_\_\_/ ENGELS /\_\_\_/**

**DO HEREBY APPLY FOR PARTICIPATION / DOEN HIERMEE AANSOEK OM DEELNAME**

**12.** MEMBERSHIP REQUIRED AS FROM **D D M M C C Y J**DEELNAME WORD VERLANG VANAF **/\_\_\_/\_\_\_/ /\_\_\_/\_\_\_/ /\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**TYPE OF MEMBERSHIP FOR WHICH APPLICATION IS MADE - TICK NEXT TO RELEVNAT MEMEBRSHIP (SEE PAGE 7) TIPE DEELNAME WAARVOOR AANSOEK GEDOEN WORD (SIEN BL 7)**

|  |  |  |  |
| --- | --- | --- | --- |
| **/ 1** | **/** | **REGISTERED BREEDER/ GEREGISTREERDE TELER** | **(PAGE 7)** |
| **/ 2** | **/** | **JUNIOR MEMBER/ JUNIOR LID** | **(PAGE 7)** |
| **/ 3** | **/** | **STUDENT MEMBER/ STUDENTE LID** | **(PAGE 7)** |
| **/ 4** | **/** | **SPECIAL MEMBER/ SPESIALE LID** | **(PAGE 7)** |
| **/ 5** | **/** | **COMPANY / MAATSKAPPY** | **(PAGE 8)** |
|  |  | **BODY CORPORATE / REGSPERSOONLIKHEIDS-LIGGAAM** |  |
| **/ 6** | **/** | **PARTNERSHIP / VENNOOTSKAP -** | **(PAGE 9)** |
|  |  | **NUMBER OF PARTNERS / AANTAL VENNOTE /\_\_ \_/** |  |
| **/ 7** | **/** | **TRUST** | **(PAGES 10 & 11)** |

**13.** WERE YOU FORMELY OR ARE YOU AT PRESENT A PARTICIPANT OF ANY BREED SOCIETY WITH REGARD TO THE SAME

OR ANY OTHER BREED?

IS U HUIDIGLIK OF WAS U VOORHEEN ‘N DEELNEMER VAN ENIGE TELERSGENOOTSKAP TEN OPSIGTE VAN DIESELFDE

OF ENIGE ANDER RAS? **YES/JA /\_\_\_/ NO/ NEE /\_\_\_/**

IF YES, STATE HEREUNDER THE BREED SOCIETY AND YOUR PARTICIPANT NUMBER, IF AVAILABLE.

INDIEN JA, MELD HIERONDER VAN WELKE GENOOTSKAP EN VERSTREK U DEELNEMERNOMMER, INDIEN BESKIKBAAR:

**BREED SOCIETY NUMBER**

**RASGENOOTSKAP: NOMMER :**

3

**HERD PARTICULARS / KUDDEBESONDERHEDE**

1. **TITLE** (indicate PROF., DR., MR., MRS., MISS., etc.)

**TITEL** (meld PROF., DR., MNR., MEV., MEJ., ens.) **/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

1. **INITIALS / VOORLETTERS / / / / / /** / / /
2. **SURNAME / VAN**

**/ / / / / / / / / / / / / / / / / / / / / / / / / / / / / / /**

1. **FARM NAME**

**PLAAS NAAM / / / / / / / / / / / / / / / / / / / /**

1. **TOWN OR CITY NEAREST TO YOUR FARM / DORP OF STAD NAASTE AAN U PLAAS**

**/ / / / / / / / / / / / / / / / / / / / / / / /**

**POSTAL ADDRESS WHERE YOUR CORRESPONDENCE MUST BE SENT TO:**

**MELD DIE POSADRES WAARHEEN U KORRESPONDENSIE GESTUUR MOET WORD**

1. ADDRESS LINE 1

ADRESLYN 1 / **/ / / / / / / / / / / / / / / / / / /**

1. ADDRESS LINE 2

ADRESLYN 2 **/ / / / / / / / / / / / / / / / / / / /**

1. ADDRESS LINE 3

ADRESLYN 3 **/ / / / / / / / / / / / / / / / / / / /**

1. POSTAL CODE TELEPHONE NUMBER

POSKODE **/\_\_\_/\_\_\_/\_\_\_/\_\_\_/** TELEFOON NOMMER **( )( )**

FAX/FAKS: **( )( )** CELL /SEL**:**

1. E-MAIL ADDRESS:   
   E-POS ADRES:
2. **MY/OUR CHOICE FOR A HERD NAME (PREFIX) IS / MY/ONS KEUSE VIR KUDDENAAM (VOORVOEGSEL) IS:**

(Please supply six [6] combinations in order of preference) **/** (Verstrek asb. Ses [6] keuses in orde van voorkeur.)

***Names of towns and cities are not allowed. / Name van dorpe en stede word nie toegelaat nie***

1. **PREFIX / VOORVOEGSEL**
2. **/ / / / / / / / / / / / / / / / / / /**
3. **/ / / / / / / / / / / / / / / / / / /**
4. **/ / / / / / / / / / / / / / / / / / /**
5. **/ / / / / / / / / / / / / / / / / / /**
6. **/ / / / / / / / / / / / / / / / / / /**

4

1. **PROVINCE / PROVINSIE:**

**DEUR WIE IS U VOORGESTEL? 1)**

**( 1 persoon wat lid is van die Genootskap) Kontak nr:**

1. **KEEPER / OPSIGTER**

The Keeper is the person where the animals are, if this person is the same as the participant, skip (item 14)

Die Opsigter is die die persoon by wie die diere loop, indien hierdie persoon dieselfde is as by die deelnemer, los (item 14)

**14.1. TITLE** (indicate PROF., DR., MR., MRS., MISS., etc.) / **TITEL** (meld PROF., DR., MNR., MEV., MEJ., ens.) **/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

**14.2. INITIALS / VOORLETTERS / / / / / / NAAM/NAME:**

**14.3. SURNAME / VAN / / / / / / / / / / / / / / / / / / / / / / / / / /**

**14.4 EMAIL / EPOS: ( ) CELL /SEL:**

1. **PLAASBESONDERHEDE / FARM DETAIL:**Please provide us with the GPS co-ordinates of you farm:

**TAKE NOTE / NEEM KENNIS:   
*I agree to observe and be bound by the constitution and the rules, regulations and bye-laws of SA Stud   
Book and the SA Arab Horse Society / Ek onderneem om my aan die bepalinge in die grondwet en die   
reëls, regulasies en verordeninge van SA Stamboek en die Arabierperdgenootskap van SA te onderwerp.***

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***SOCIETY FEES FOR 2019* – *NEW MEMBERSHIP APPLICATIONS   
ARABIERPERDGENOOTSKAP VAN SA / ARAB HORSE SOCIETY OF SA***

**INTREEFOOI/ENTRY FEE R 1 500.00 (once off / eenmalig)**

**LEDEGELD/MEMBERSHIP R 720.00 (Jan 2019 to Dec 2019)**

**KUDDENAAM/PREFIX R 100.00 (once off / eenmalig)**

**GEBOORTEKENNISGEWINGBOEK**

**BIRTH NOTIFICATION BOOK R 300.00**

**DEKKINGSSERTIFIKAATBOEK**

**SERVICE CERTIFICATE BOOK R 200.00**

**KOERIERKOSTE**

**COURIER COST R 100.00**

**TOTAAL/TOTAL R 2 900.00**

**BETALING/PAYMENT :**

**ARABIERPERDGENOOTSKAP VAN SA/ARAB HORSE SOCIETY OF SA**

**STANDARD BANK : 041216776**

**TAK/BRANCH : 055534**

**Verw/Ref : Surname**

**(PRYSE SLUIT B.T.W IN / VAT INCLUDED)**

***STUD BOOK FEES FOR 2019* – *NEW MEMBERSHIP APPLICATIONS***

**INTREEFOOI / ENTRY FEE R 353.97 (once off / eenmalig)**

**STOETNAAM/PREFIX R 454.25 (once off / eenmalig)**

**DIREKTE FAKTURERING / DIRECT INVOICING R 80.50**

**JAARLIKSE FOOI / ANNUAL FEE R 166.12**

**TOTAAL/TOTAL R1054.84**

**INBETALING/PAYMENT**

**SA STAMBOEK/SA STUDBOOK**

**STANDARD BANK : 041 191 358**

**TAK KODE : 055534**

**VERW/REF : INITIALS & SURNAME**

**ONDERTEKEN TE HIERDIE DAG VAN 20\_\_\_\_\_**

**SIGNED AT THIS DAY OF**

**HANDTEKENING VAN APPLIKANT WITNESS SIGNATURE**

**SIGNATURE OF APPLICANT NAME & SURNAME:**

**EMAIL:   
CELL / SEL NR:**

6

**Lys van Stamboek diere van die Arabierperdras soos by Genootskap geregistreerd List of Stud Book Animals of the Arabian horse as registered with the Society**

**REGISTRATION NO. COLOUR SEX REGISTERED NAME OF HORSE**

**REGISTRASIE NR. IDENTIFIKASIE / KLEUR GESLAG VOLLE NAAM VAN ARABIERPERD**

7

**MEMBERSHIP**

**ELIGIBILITY**

The membership of the Society shall be open to persons who, except in the case of Special Honorary Members,

are resident in the Republic of South Africa. There shall be the following classes of members −

1. **REGISTERED BREEDER**

A natural person over the age of eighteen years, who is a South African citizen, company, close corporation, partnership, trust or body corporate which has a stud with recorded prefix registered through the Arab Horse Society of South Africa on behalf of the breeder by the Registering Authority on the Intergis and which person, over the age of 18 years, a South African company, close corporation, partnership, trust or body corporate duly incorporated and registered in South Africa who is the registered owner of a registered or recorded mare with the Arab Horse Society of South Africa, which mare is two years and older, and that mare has bred a foal that is registered / recorded under the prefix of the registered breeder. A registered Breeder will thus enjoy the right to vote at any general meetings, special meetings and or Provincial meetings. A Registered Breeder which is a company, close corporation, partnership, trust or body corporate shall be represented and shall enjoy the rights, duties and privileges of a Registered Breeder through one natural person over the age of 18 years appointed and nominated by the said company, close corporation, partnership, trust or body corporate as its official representative in terms of the Constitution.

1. **HONORARY LIFE MEMBERS**

For special services in the interest of horses, a person may at an Annual General Meeting be elected as Honorary Life Member who shall enjoy all the rights and privileges of membership, including the right to vote at any meeting of the Society and the right to be elected to the Council, provided that no such person shall be eligible for Honorary Life Membership unless recommended by the Council.

1. **SPECIAL HONORARY MEMBERS**

Persons not necessarily actively engaged in the breeding of horses may be elected Special Honorary Members by the Council upon such conditions as the Council may determine. Special Honorary Members may not vote at meetings of the Society and are not eligible for election to the Council.

1. **JUNIOR MEMBERS**

Persons under the age of eighteen (18) years may become Junior Members by approval of the Council, subject to their parents or guardians counter-signing the application for membership and accepting full responsibility for the financial and other commitments towards the Society on behalf of such junior member. Junior members may not vote at meetings of the Society and are not eligible for election to the Council. Upon payment of the scheduled fees, they may partake in the other activities of the Society.

1. **STUDENT MEMBERS**

Persons who are eighteen (18) years of age or older and registered for full-time study may become student members by approval of the Council. Student members will be accorded the same rights and privileges as junior members and shall automatically become Registered Breeders upon conclusion of such studies. Part-time students may also qualify for student membership.

1. **SPECIAL BREEDER**

Any person who is 18 years old or older and is a Foreign National can become a Registered Breeder, but will not enjoy the rights and privileges of the Society and or be eligible to be elected into any position in the Arab Horse Society of South Africa.

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**FOR COMPLETION BY THE DIRECTORS / MEMBERS OF COMPANIES / CLOSE CORPORATIONS   
VIR VOLTOOIING DEUR DIE DIREKTEURE VAN MAATSKAPPYE / BESLOTE KORPORASIES**

I / We (full names and addresses please)   
Ek / Ons (volle name en adresse asseblief)

**/ / / / / / / / / / / / / / / / / / / / / / / /**

**/ / / / / / / / / / / / / / / / / / / / / / / /**

in my / our capacity as Director of the Company / individual members of the close corporation, declare myself / ourselves prepared in our personal capacities to be held responsible for the payment of the outstanding debts of the Company/Close Corporation

in my / ons hoedanigheid as Direkteure van die Maatskappy / individuele lede van die Beslote Korporasie, verklaar myself / onsself hiermee bereid om in ons persoonlike hoedanigheid verantwoordelik te wees vir die vereffening van die uitstaande skulde van die Maaatskappy/beslote Korporasie

**VOLTOOIING DEUR DIREKTEURE VAN MAATSKAPPYE / BESLOTE KORPORASIES:** *Gevolmagtigde* v*erteenwoordiger* van maatskappy, private maatskappy of regspersoon soos bepaal op 'n

vergadering van die direkteure / lede gehou op 20

*Authorised representative* of company, private company or body corporate as determined at a meeting of

directors / members held on 20

Naam / Name:   
Adres / Address:

SIGNATURES / HANTEKENINGE: SIGNATURES / HANTEKENINGE:

9

**PARTNERSHIPS / VENNOOTSKAPPE**

***In the event of a partnership one of these documents must be completed for EVERY partner in the partnership and these documents must accompany the application for membership / In geval van 'n vennootskap moet een van hierdie dokumente volledig voltooi word vir elke vennoot in die vennootskap en moet die dokumente die aansoek om lidmaatskap vergesel.***

**I / EK,**

1. **INITIALS**

**VOORLETTERS / / / / / / /**

1. **NAME AND SURNAME / NAAM EN VAN**

**/ / / / / / / / / / / / / / / / / / / / / / / /**

1. **TITLE** (State PROF., DR., MR., MRS., MISS., etc.)

**TITEL** (Meld PROF., DR., MNR., MEV., MEJ., ens.) **/\_\_\_/\_\_\_/\_\_\_/\_\_\_/**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 1. ADDRESS LINE 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ADRESLYN 1 **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** |
| 1. ADDRESS LINE 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ADRESLYN 2 **/**  **/** |  | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** |
| 1. ADDRESS LINE 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ADRESLYN 3 **/**  **/** |  | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** | **/** |

1. POSTAL CODE TELEPHONE NUMBER CODE

POSKODE **/\_\_\_/\_\_\_/\_\_\_/\_\_\_/** TELEFOON NOMMER KODE

CEL   
SEL**:**

1. E-MAIL ADDRESS   
   E-POS ADRES :

THAT APPLIED FOR MEMBERSHIP UNDER THE MEMBERSHIP NAME:

WAT AANSOEK GEDOEN HET OM LIDMAATSKAP ONDER DIE LIDMAATSKAP NAAM:

**/ / / / / / / / / / / / / / / / / / / / / / / /**

DO HEREBY AGREE AND ARE BOUNDED TO BE HELD JOINTLY AND SEPARATELY RESPONSIBLE FOR PAYMENT OF ANY MONIES DUE AND PAYABLE TO THIS ASSOCIATION AS MAY BE PAYABLE FROM TIME TO TIME / ONDERNEEM EN IS GEBONDE OM GESAMENTLIK OF AFSONDERLIK VERANTWOORDELIK GEHOU TE WORD VIR BETALING VAN ENIGE GELDE WAT AAN HIERDIE GENOOTSKAP VAN TYD-TOT-TYD BETAALBAAR MAG WEES.

***Gevolmagtigde* v*erteenwoordiger* van vennootskap soos bepaal op 'n vergadering van die vennote gehou op 20**

***Authorised representative* of partnership as determined at a meeting of partners held on 20**

Naam / Name:   
Adres / Address:

SIGNED AT THIS DAY OF

ONDERTEKEN TE HIERDIE \_\_\_\_\_\_ DAG VAN 20\_\_\_\_\_

SIGNATURE OF PARTNER

HANDTEKENING VAN VENNOOT

10

**FOR COMPLETION BY THE TRUSTEES OF TRUSTS APPLYING FOR MEMBERSHIP: TRUST   
TRUSTEES VAN 'N TRUST WAT AANSOEK DOEN VIR LIDMAADSKAP**

I / We (full names and addresses of each and every trustee please)   
Ek / Ons (volle name en adresse van iedere en elke trustee asseblief)

**/ / / / / / / / / / / / / / / / / / / / / / / /**

**/ / / / / / / / / / / / / / / / / / / / / / / /**

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**/ / / / / / / / / / / / / / / / / / / / / / / /**

in my / our capacity as trustees of the trust declare myself / ourselves prepared

in our personal capacities and in our capacities as trustees to be held responsible for the payment of the outstanding debts of the trust.

in my / ons hoedanigheid as trustees van die trust, verklaar myself / onsself hiermee bereid om in ons persoonlike hoedanigheid verantwoordelik te wees vir die vereffening van die uitstaande skulde van die trust

11

**VOLTOOIING DEUR VAN DIE TRUSTEES VAN DIE TRUST:**

*Gevolmagtigde* v*erteenwoordiger* van die trust soos bepaal op 'n

vergadering van die trustees gehou op 20

*Authorised representative* of the trust as determined at a meeting of

trustees held on 20\_\_\_\_\_

Naam / Name:

Adres / Address:

Naam / Name:

Adres / Address:

Naam / Name:

Adres / Address:

**SIGNATURE OF APPLICANT SIGNATURE OF SOCIETY**

**HANTEKENING VAN APPLIKANT HANTEKENING VAN GENOOTSKAP**