

# Membership Application



PPE-Geschäftsstelle:  
e-Mail: geschaeftsstelle@paso-peruano.de

Hereby I do apply for membership of the Paso Peruano Europa e.V. – PPE Association

## Contributions:

- |                          |   |  |   |
|--------------------------|---|--|---|
| <input type="checkbox"/> | Regular Member  | € 75,---   | When applying in the 2nd half of the year (1.4.-30.9.) only half of the contribution is due for the first year! |
| <input type="checkbox"/> | Family Member   | € 25,--  |   |
| <input type="checkbox"/> | Student   | € 25,--  |   |
| <input type="checkbox"/> | New Paso Peruano Owner                                    | € 0,-- in the first year*, then see above. ( Valid within the first year of acquisition of a first Paso Peruano) |   |
| <input type="checkbox"/> | Recruited by existing Member<br><i>(not for breeders)</i> | ½ of the contribution in the first year*, then see above   |   |

Recruited by: \_\_\_\_\_  
*(Recruiter pays only ½ of the contribution in that year)*

*\* A reduced contribution is granted provided that a short article with the Paso-experience and photo is published in the Pasollano news.*

- Recruited by breeder \_\_\_\_\_ (Advertisements of this breeder will be contributed on fares etc. without charge)

Name of purchased horse and its breeder \_\_\_\_\_

Name/s of horse/s and breeder/s of other Peruvian Pasos owned \_\_\_\_\_

## Address:

Family Name	First Name	Date of Birth
Street and Number	Postcode and City	Country
eMail	Tel.	Fax

- I agree with the PPE By-Laws. I agree with the utilization of data from this PPE-Membership.

\_\_\_\_\_  
Place, Date

\_\_\_\_\_  
Signature (Cosigned by a parent in the case of a minor)

## No agreement

- I do **not** agree that my adress is passed on to other PPE-Members or other persons.

Signature: \_\_\_\_\_