



PPE Association Office:
E-Mail: Geschaeftsstelle@paso-peruano.de

Membership Application

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 | ½ of the contribution in the first year*, then see above | |

Recruited by: _____ (Recruiter also 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 address is passed on to other PPE-Members or other persons.

Signature: _____