



IMPORTANT INFORMATION



Membership Update

TO: Droughtmaster Breeders' Society, Fax: (07) 3878 1569

MEMBERSHIP NAME.....

IN THE CASE OF A COMPANY, PLEASE STATE FULL NAME OF PRINCIPAL.

.....

FULL NAME OF PERSON IN CHARGE OF STUD.....

.....

FULL NAME OF NOMINATED PERSON FOR SIGNING FORMS AND VOTING RIGHTS

.....

STUD PREFIXHERD CODE.....

STUD NUMBER.....

POSTAL ADDRESS

.....

TELEPHONE: ()..... FAX: ().....

MOBILE NUMBER:

EMAIL:

SIGNATURE OF NOMINATED PERSON:.....

"The information provided on this form will be dealt with in accordance with the Society's Privacy Policy. The Privacy Policy can be obtained from the Society's website at www.droughtmaster.com.au or by making a request to the Society either by phone, fax or post."