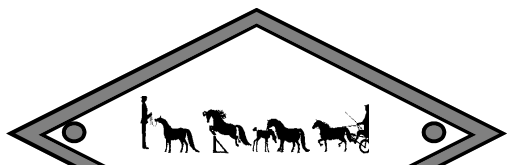


New Zealand Miniature Horse Association Inc



Affiliated to the Royal Agricultural Society of NZ Inc

Please return form to
NZMHA Measuring Coordinator

Phone: 06 844 7707

TAX INVOICE

(when paid - retain copy for your records)

GST # 81-700-036

MEASURING RETURN – AFFILIATED CLUBS

Name of Affiliated Club: _____

Contact Person: _____

Phone: _____

Email: _____

DETAILS OF MEASURING DAY:

Date: ____ / ____ / ____ Time: ____ : ____ am/pm Venue: _____

MEASURING FEES COLLECTED:

\$ _____ Number of horses measured @ \$5.00 = _____

\$ _____ Number of horses measured @ \$20.00 = _____

\$ _____ TOTAL FEES COLLECTED _____

50% to
NZMHA \$ _____ club cheque attached _____

_____ Total number of height cards issued _____

_____ Total number of voided cards _____

_____ Total number of replaced (lost) cards a \$20.00 _____

DECLARATION: - I hereby certify that all information supplied is true and correct to the best of my knowledge and that I will ensure that the measuring return and payment is returned to NZMHA within seven days of the measuring taking place.

Signature: _____

Date: ____ / ____ / ____

Position: _____

Checklist

All details completed

Form Signed

08/2014

