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Proxy Voting Form

For the use of the ASPA Member who is unable to attend the Annual General Meeting of the Australian Saddle Pony Association.

I, _____ of _____
(Print Name of Nominated member) (Address)

_____ Phone _____

Being the duly notified "Member" for the Australian Saddle Pony for the purpose of the register of the Members of the Association, hereby authorise:

_____ of _____
(Print Name of Proxy) (Address)

who is a financial member of the Australian Saddle Pony Association to act FOR AND ON MY BEHALF at the annual General Meeting of the Australian Saddle Pony Association on the _____ day of _____ 20_____

Sigend: _____ Date: _____
(Registered "Member")

Authorised by: _____

Signed: _____ Date: _____
(Club Secretary or President)

Print Name: _____ Office held: Secretary/President

Address: _____

Telephone: _____

This form must be received at the ASPA office at least 24 hours prior to the scheduled commencement of the meeting.