

FPZV Membership application

I hereby apply for membership in the Friesenpferde-Zuchtverband e.V. (FPZV)

Name: _____

Address (street and number): _____

Place: _____

Date of birth: _____

Phone number: _____

E-Mail: _____

I will receive an invoice for the annual fee and the one-off admission fee. You find the current prices on the website www.fpzv-ev.de

Current membership fee per year:

- full member
- connection member
- teenager / student
- promotional member

I own Friesian horses: ____ stallion/s ____ mare/s ____ foal/s ____ gelding/s (please specify quantity). I will send all necessary information for the registration to the FPZV office (copies of the horse papers, DNA-tests, show-results and so on).

I was recruited by : _____ where: _____

Information on dates, articles of association, breeding book regulations, fees etc. can be found on our homepage www.fpzv-ev.de.

Date, place, signature (in case of minority, signature of parents or guardians)

Anschrift:
Friesenpferde-
Zuchtverband e. V.
Buchenstraße 4
79862 Höchenschwand

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Steuer-Nr.
09 250 55819
Amtsgericht Freiburg
VR 703583