



Change of Ownership Form

NEW OWNERSHIP DETAILS

Primary Owner	
NAME	ESNZ #
EMAIL	
PHONE	DOB (dd/mm/yyyy) / /

Other Owner (if applicable)	
NAME	ESNZ #
EMAIL	
PHONE	DOB (dd/mm/yyyy) / /

Person Responsible <input type="checkbox"/> Same as Primary Owner	
NAME	ESNZ #
EMAIL	
PHONE:	DOB (dd/mm/yyyy) / /

Rider <input type="checkbox"/> Same as Primary Owner	
NAME	ESNZ #
EMAIL	
PHONE	DOB (dd/mm/yyyy) / /

PLEASE READ

- Primary Owner AND Person Responsible MUST be 18 years of age or older.
- Person Responsible will be listed as per primary owner if not otherwise stated.
- Rider and AT LEAST ONE owner must be financial members of ESNZ.

EQUINE DETAILS

EQUINE NAME
ESNZ #
DATE OF SALE (dd/mm/yyyy) / /

PREVIOUS PRIMARY OWNER

NAME	ESNZ #
ADDRESS	POSTCODE
EMAIL	PHONE:

SIGNATURE OF NEW PRIMARY OWNER	DATE
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SIGNATURE OF PREVIOUS PRIMARY OWNER	DATE
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FEE SUMMARY AND PAYMENT

	Cost	Totals
<input type="checkbox"/> Change of Ownership	\$30.00 (includes GST)	\$

PAYMENT DETAILS

APPLICATION TOTAL

\$

Please note, we only accept payments via debit/credit card.

4.8% transaction fee applies

NAME ON CARD	
CARD TYPE	
CARD NUMBER	
CVC (3 digits on the back of the card)	EXPIRY DATE /

