

APPLICATION FOR MEMBERSHIP

PLEASE COMPLETE IN BLOCK CAPITALS

TITLE	MISS / MS / MRS / MR / DR / OTHER: [Delete as appropriate]						
NAME							
ADDRESS							
	POST CODE						
TELEPHONE	MOBILE						
EMAIL							
IUNDERSTAND	THAT IT IS A CONDITION OF JOINING THAT:						
1) All members shall conduct themselves in a proper manner at all times. Any member deemed by the committee to have behaved inappropriately may receive a written warning from the Chairman or Secretary of the Club and on receipt of a second warning may be asked to resign from the Club.							
	2) Members agree to assist at a minimum of two Rogate & District Riding Club events throughout the membership year, commencing 1st November.						
3) I am (over 18 years of age.						
4) I agre	e to abide by the decision of the Equine Welfare Officer regarding my animals at all club events.						
ON BECOMING A MEMBER I AGREE TO ABIDE BY THE RULES & CONSTITUTION OF THE ROGATE & DISTRICT RIDING CLUB.							
SIGNED	DATE						
SUBSCRIPTION	I FEES						
Rider: Non rider: Rider:*	£25.00£15.00£45.00 (unable to complete their annual helps quota)						
, , , ,	e higher 'Rider' fee but throughout the year find you are able to carry out two helps, then you will receive a refund of £20 at the end of the prefer, the £20 can be deducted from the following year's membership fee.						
Payment option (Tick chosen option)	Secount: 2309 0094. Sort Code: 20-67-49. Reference: Surname + "membership"						
Information provided on this form, together with any other information deemed relevant towards the running of the Club will be held securely within the Club's database(s). This information will not be disclosed to third parties without the permission of the Committee. Permission will only be given for the benefit of the Club and its members. If you do not wish your details to be disclosed in this instance, please tick here:							

PLEASE RETURN COMPLETED FORMS TO:

Mrs Natashia Murch, 41 Manor Lane, Selsey, Chichester, PO20 0UX.



PERSONAL INFORMATION

Please complete all relevant sections and indicate if you are interested in competing in team events for each discipline where applicable:

DISCIPLINE	YES	N0	CURRENT LEVEL

If you would be interested in participating in Team Events for the club, please specify below. Please note that BHS Rules do not permit you to compete in team events for more than one affiliated riding club during the same year.

DETAILS OF HORSES

NAME Inc winnings, points and experience	AGE	HEIGHT	FLU CERT Y/N	OWNER

Please continue on additional sheet if required.

HELPS	
As per the conditions of membership (unless the h would prefer to be involved with:	igher membership fee is paid), please indicate below the duties you
	PLEASE TICK
Dressage Winter Series	
Dressage Summer Series	
Show Jumping Winter Series	
Show Jumping Summer Series	
Team Events	
Without the helps from our members, we are All helps are gratefully received, whether it's	unable to put on events and competitions throughout the year. for a whole day, $\frac{1}{2}$ day or even a few hours.
	vill class as your two helps for the year. By carrying out your two FREE members day which will be held in 2019.

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