



## APPLICATION FOR MEMBERSHIP

PLEASE COMPLETE IN BLOCK CAPITALS

TITLE MISS / MS / MRS / MR / DR / OTHER  
(DELETE AS APPROPRIATE)

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE \_\_\_\_\_ POSTCODE \_\_\_\_\_

MOBILE \_\_\_\_\_

EMAIL \_\_\_\_\_

### I UNDERSTAND 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 on 1<sup>st</sup> January.
3. I am over 18 years of age.
4. I agree 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 FEES:

- Rider, option 1:  £30.00
- Rider, option 2\*:  £45.00 (unable to complete their annual 'helps' quota)

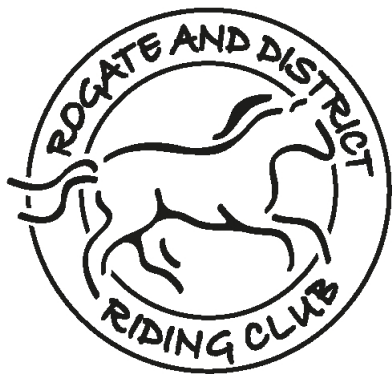
\*If you are paying the Rider, Option 2 fee but throughout the year find you are able to carry our two 'helps', then you will receive a refund of £15.00 at the end of the club year, or, if you prefer, the £15.00 can be deducted from the following year's membership fee.

- Payment options:  **Cheque -**  
Made payable to 'Rogate & District Riding Club'
- Bank Transfer -**  
Account: 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 Natasha 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	NO	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:**

Please continue on additional sheet if required.

Please email a copy of your horses Vaccination Record to [rogateridingclub@gmail.com](mailto:rogateridingclub@gmail.com)

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

**HELPS:**

As per the conditions of membership (unless the higher membership fee is paid), please indicate below the duties you would prefer to be involved with:

- Dressage series
- Show Jumping series
- Team Events
- Member's Day

Without the helps from our members, we are unable to put on events and competitions throughout the year. All helps are greatly received, whether its for the whole day, half a day or even a few hours.

If you are able to help at the Area Event, this will class as your two helps for the year. By carrying out your two helps you will have priority to take part in our **FREE member's day**. A charge will be payable by members paying the higher member's fee to attend member's day.

