

PERTH HORSE AND PONY CLUB INC.

PCAWA MEMBERSHIP APPLICATION

MEMBER INFORMATION

Rec No _____
PCAWA _____

Full Name: _____

Address: _____

Suburb: _____ Postcode: _____

Phone: _____ Date of Birth: _____

Email: _____

NOMINATED GUARDIAN INFORMATION

Parent/Guardian Name: _____

Telephone (Home): _____ (Work) _____

EMERGENCY CONTACT

IN THE EVENT OF AN EMERGENCY, IF THE PARENT/GUARDIAN CAN NOT BE CONTACTED QUICKLY,
IS THERE ANY OTHER PERSON WHO COULD BE CONTACTED?

Emergency Contact: _____

Telephone (Home): _____ (Work) _____

HORSE INFORMATION

Name of Horse(s): _____

Height: _____

PONY CLUB INFORMATION

Previous Pony Club: _____

Pony Club Certificate Level already passed:
(Please tick appropriate response)

D Certificate: D Gold Star: K Certificate:

C Certificate: C* Certificate:

Riding Preferences:

Hacking Dressage Showjumping Novelties
Eventing

IMPORTANT!

Are you interested in representing the Club in the Pony Club Championships at the end of the year? **Yes/No**

NOTE 1: IT IS COMPULSORY THAT YOU ATTEND A MINIMUM OF THREE RALLIES IN ORDER TO REPRESENT PERTH PONY CLUB

NOTE 2: IT IS ALSO COMPULSORY THAT A PARENT OR NOMINATED GUARDIAN BE PRESENT WHENEVER A CHILD/CHILDREN ATTEND RALLIES.

I HEREBY AGREE THAT THE INFORMATION SUPPLIED ABOVE IS CORRECT AND I WILL ABIDE BY THE RULES AND REGULATIONS OF THE PERTH HORSE AND PONY CLUB.

MEMBER SIGNATURE: _____

DATE: _____/_____/_____

PARENT/GUARDIAN SIGNATURE: _____

DATE: _____/_____/_____

Please Note: Riding, Non Riding and/or Family Membership Form must be completed and accompany this form.

PCAWA Insurance	\$ 71.00
Guardian	<u>\$ 29.00</u>
Total	<u>\$100.00</u>

To be Returned to: The Treasurer
Mrs Melanie Bray
Lot 7 Cranleigh Street
WEST SWAN WA 6055

Phone: 9250 3963