ACT. & S.H. Show Horse Association Inc.



BSB 062 593

Payment Amount:

Account 10163748

\$

P.O. BOX 310 Canberra ACT 2601 | E: <u>Tanya.benton@education.gov.au</u>|Affiliate of Show Horse Council Of



APPLICATION FOR NEW MEMBERSHIP/MEMBERSHIP RENEWAL - 2017/2018

Please read this application carefully, complete all required details and sign. If the Application is on behalf of a minor less than eighteen (18) years of age, then a parent/guardian is to sign. The correct fee must accompany the application. Applications are to be forwarded directly to the Affiliate Association – the Schedule of Fees and contact details for each Affiliate may be found at www.showborsecouncilaust com au

APPLICATION & PERSONAL DETAILS APPLICATION & PERSONAL DETAILS			
l,	MEMBER NUMBER:		
Surname Given Name/s hereby apply for new membership/membership renewal of	(SHCA Affiliate).		
TYPE OF MEMBERSHIP (please tick): ADULT ACTIVE	JUNIOR ACTIVE NON-ACTIVE		
ADDRESS: POSTAL ADDRESS (if different, eg PO			
State: Postcode:	State: Postcode:		
PIC:	DATE OF BIRTH:		
TELEPHONE:	EMAIL:		
MOBILE:			
I agree to the following personal details being displayed to the public in the SHCA On-Line Registerof National Saddle Horses(unless this section is completed, the information will	I agree to my contact details being supplied to selected stakeholders in the Sport : Yes		
NOT be visible): Name Yes Address Yes Telephone/email Yes			
	peing in force, of both the Affiliate and the SHCA. I declare, in making Association.		
I knowingly and freely assume all such risks, both known and unknown responsibility for any injury, death or property damage I may suffer tha			
I understand and acknowledge the dangers associated with the consumactivity and I take full responsibility for any injury, loss or damage assoc prohibited by law before or during these activities.			
I agree to follow the directions of any event organiser or official and the organiser or official can result in the <u>CANCELLATION</u> of my participation <u>MATTER</u> where that may occur. I understand that any such non-complia of my failure to comply.	in these activities and my immediate removal from my horse NO		
I agree to wear a helmet at all times where required in accordance with that I comply with the SHCA Rules and take sole responsibility for my ac			
Signed: (Signature of Applicant or Parent/Guardian if under 18 years of age)	Date:		
Direct Deposit to:	ACT & Southern Highlands Show Horse Assoc.		

Reference:

Received:

(member name)



SHOW HORSE COUNCIL OF AUSTRALASIA INC

 $\underline{www.showhorsecouncilaust.com.au}$

ABN 51 590 953 920

MEMBER FEE SCHEDULE NSW & ACT AFFILIATES - 2017/2018

Category 1	Adult – 24/7 P.A. applies		
NEW	Joining Fee		\$10.00
Period 1/7/17 – 30/6/18	ADULT ACTIVE/RIDING MEMBER		\$100.00
		Total	\$110.00
RENEWAL			
Period 1/7/17 – 30/6/18	ADULT ACTIVE/RIDING MEMBER		\$100.00
PRO-RATA (NEW	Joining Fee		\$10.00
MEMBERS ONLY)			
Period 1/1/18 – 30/6/18	ADULT ACTIVE/RIDING MEMBER		\$80.00
		Total	\$90.00
Category 2	Junior – 24/7 P.A applies		
NEW	Joining Fee		\$10.00
Period 1/7/17 – 30/6/18	JUNIOR ACTIVE/RIDING MEMBER		\$80.00
		Total	\$90.00
RENEWAL			
Period 1/7/17 – 30/6/18	JUNIOR ACTIVE/RIDING MEMBER		\$80.00
PRO-RATA (NEW			
MEMBERS ONLY)	Joining Fee		\$10.00
Period 1/1/18 – 30/6/18	JUNIOR ACTIVE/RIDING MEMBER		\$65.00
		Total	\$75.00
Category 3 (see below)	Non-Active – 24/7 P.A. does NOT apply		
NEW	Joining Fee		\$10.00
Period 1/7/17 – 30/6/18	NON-RIDER/NON-COMPETITOR		\$50.00
		Total	\$60.00
RENEWAL			4-0.55
Period 1/7/17 – 30/6/18	NON-RIDER/NON-COMPETITOR		\$50.00

Category 3 Non-Rider/Non-Competitor Membership is for the applicant who DOES NOT ride a horse at ANY time, either for pleasure, exercise or training & DOES NOT COMPETE as a rider or hander of a horse in ANY competition or event.

Applicants for New Membership/Membership Renewals should refer to the Member Insurance Brochure on the SHCA website www.showhorsecouncilaust.com.au for a summary of the cover automatically provided as a benefit of membership of an Affiliate of the SHCA.