



# TOWY VALLEY RIDING CLUB



## APPLICATION FOR MEMBERSHIP

Full name of Applicant: (Mr. / Mrs. / Miss. / Ms)

Address:

Post Code:

Daytime telephone number:

Evening telephone number:

Mobile telephone number:

Fax no:

Email address:

Do you wish to receive your monthly Newsletter / Schedules by email? Yes  No

Note: Mailing costs £5 per member per year so pay only the membership fee of £20 if you use email instead!

How did you hear about TVRC?

I, *(insert name)* apply to become a member of Towy Valley Riding Club. I confirm that I am over 18 years of age. I understand that my application will be determined by the Committee. I understand that membership of the TVRC requires that I give active help during each year at one or more events during my membership period. I enclose my membership fee in the sum of £25.00 (Only £20.00 if you use email) which will be refundable in the event of my application being refused (cheques should be made payable to Towy Valley Riding Club).

NB: the Membership year runs from 1<sup>st</sup> September to 31<sup>st</sup> August, and memberships must be renewed in September, irrespective of date of joining.

Signature:

Date:

Although not required for membership it would help the club to organise the right mix of events if we know our member's preferences. We would be grateful if you would complete the following:

Are you a Horse owner: Yes  No

Is your horse vaccinated to BRC standards: Yes  No

If you have a BHS qualification, at what level:

When do you prefer to take part in events (please tick one only): Any time

Week end Daytime  Week end evenings  Any Weekend time

Week day Evenings  Weekday Daytime  Any week day time

Please indicate what activities you are interested in. Please put 1 2 & 3 against your top 3 interests.

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Lectures / Demonstrations | <input type="checkbox"/> Instruction         | <input type="checkbox"/> Stable Management |
| <input type="checkbox"/> Dressage                  | <input type="checkbox"/> Show Jumping        | <input type="checkbox"/> Hunter Trials     |
| <input type="checkbox"/> Horse Trials              | <input type="checkbox"/> Cross Country Hacks | <input type="checkbox"/> Social Events     |
| <input type="checkbox"/> Endurance Riding          | <input type="checkbox"/> Showing             | Any other.....                             |

Please indicate which type of event you would prefer to help with: (Please tick 1 only)

- |  |   |
|--|---|
| Any <input type="checkbox"/>           | Showing <input type="checkbox"/>            |
| Cross Country <input type="checkbox"/> | Dressage Shows <input type="checkbox"/>     |
| Show Jumping <input type="checkbox"/>  | Other (Please specify) <input type="text"/> |

**Towy Valley RC Teams** (Area qualifier competitions). Horses selected for these teams must be vaccinated against equine influenza in accordance with Riding club rules. Area competitions are qualifiers for BRC National Championships. If you are part of a successful team you must be prepared to travel to the relevant final. (The cost of this is subsidised by the club)

Would you like to be considered for a team this year? YES  NO

SHOW JUMPING		EVENTING		DRESSAGE	
At what height do you feel confident? <input type="text"/>		At what height do you feel confident? <input type="text"/>		At what level do you compete? <input type="text"/>	
BSJA Winnings £	<input type="text"/>	BE Points	<input type="text"/>	BD Points	<input type="text"/>
SJAI Points	<input type="text"/>	IHTS Points	<input type="text"/>		

These answers will be kept on file, however we will ask you to confirm your continued availability for selection nearer the date of the relevant competition.

Please return your completed form to:  
**Verna Linton,** ☎ **01558 823538**  
**Pant yr Helyg,**  
**Llandeilo,**  
**Carms.**  
**SA19 7AA**

**Date before Committee:**

**Determination of Application:**

**Signature of Chairperson:**