

Riding Pony Stud Book Society Ltd A Company Limited by Guarantee ACN 129 850 531 ABN 18 129 850 531

ompany Limited by Guarantee ACN 129 850 531 ABN 18 129 850 531 Post Office Box 623 RICHMOND NSW 2753 Ph: (02) 4577 5530 email: general@rpsbs.com.au

RENEWAL PARTICIPANT MEMBERSHIP

Participants are members who do not have horses recorded in their name and who cannot conduct transactions with the Society.

Participant members have insurance coverage for competition but not for Judging activities, RPSBS Panel Judges require Judge or Ordinary Membership.

Participant members do not have voting rights, do not receive a copy of the Annual and cannot hold office on a committee.

MEMBERSHIP NUMBER: __

MEMBERSHIP NAME

Title (<i>Mr / Mrs / Miss / Ms / Other</i>) Surname	Given Name(s)
Address	
	State Postcode
Telephone	Mobile
Website	Email

If member is under 18 years of age

- a Nominee must be recorded for this member.
 The Nominee for this member is: _________(name of Nominee)
- the members date of birth must be recorded ____/ ___/ ___ (date of birth of member under 18)
- The Parental Consent statement (over the page) must be signed by the Nominee if the Member is under 18 years of age.

Member No

Please withhold my contact details from the online Stud Book (details will be displayed if box not ticked)

I have previously been a member of the Riding Pony Stud Book Society Yes/No

Membership Name

Address of previous membership

INSURANCE DISCLAIMER

MEMBERS 18 YEARS & OVER

By paying this membership, I/we agree to be bound by the Rules, Regulations and By-Laws of the Riding Pony Stud Book Society Ltd.

By signing, below I/we declare that I/we have read and understood the RISK WARNING AND WAIVER available on the RPSBS website, acknowledging the inherent risks associated with equine activities.

MEMBERS UNDER 18 YEARS OF AGE By paying this membership, I/we agree to be bound by the Rules, Regulations	and By-Laws of the Riding Pony Stud Book Society Ltd.
By signing, below I/we declare that I/we have read and understood the RIS website, acknowledging the inherent risks associated with equine activities.	3K WARNING AND WAIVER available on the RPSBS
I/We declare that we provide consent and have read and understood the PAF Participants under 18 years of age, available on the RPSBS website.	RENTAL CONSENT AND INDEMNITY applicable for all
If the member is under 18 years of age, this form must be signed by <u>both</u> Parent/Guardian and Nominee may be the same person but must sign in	
Parent/Guardian Signature	Date
Nominee Signature	Date
Address of Nominee	Phone number
Email address of nominee	

FEES - Membership year commences on 1 July. All fees are GST inclusive

Participant Member	\$ 30.00	Participants are members who do not have horses recorded in their name. Participant members have insurance coverage for competition but do not have voting rights and do not receive a copy of the Annual. They cannot hold office on a Committee. A participant can ride or handle a horse but cannot register a horse in their own name. This membership does not cover Judging activities, RPSBS Panel Judges also require Judge or Ordinary Membership.
Total Fees Payable	\$	See payment options below

TAX INVOICE - ABN: 18 129 850 531

This is your receipted tax invoice once payment has been made. Please retain a copy

PAYMENT DETAILS - select payment method:

EFT: AN	Z Bank	Date Deposited / / Amount Deposited \$		
BSB: 012-482 Account No. 9018 79841		Please use your membership name as your reference		
		** DO NOT DIRECT DEPOSIT WITHOUT EMAILING THIS FORM **		
Credit Ca	ard: Master	card Visa		
Card Nur	nber:	CVV Expiry Date/		
Cardhold	er Name	Cardholder Signature		
NITIONS:		authorised representative who:		
NITIONS:		authorised representative who: ears of age or over;		

Completed Memberships can be sent via mail or email to: Riding Pony Stud Book Society Ltd Post Office Box 623, RICHMOND NSW 2753 Email: general@rpsbs.com.au

COMPLETED FORM MUST BE RETURNED TO THE NATIONAL OFFICE FOR THE MEMBERSHIP TO BE FINANCIAL (FOR INSURANCE PURPOSES).