


Jumping Western Australia COACHING FUNDING APPLICATION FORM

CONTACT AND PAYMENT INFORMATION			
Rider Name		Horse Name	
Email		<input type="checkbox"/> State Squad	
Young Rider	YES / NO	<input type="checkbox"/> Recognition Squad	
BSB		<input type="checkbox"/> Youth Squad	
Account Number			

COACHING FUNDING APPLICATION			
Coach	Date	Venue	Lesson Fee
TOTAL			

AGREEMENT

1. I agree that the information submitted is correct and accurate.
2. I have attached evidence of coaching with my application to Jumping WA Chair Kevin Gianatti itsashamrockfreedom@westnet.com.au
3. I have only submitted coaching fees I am eligible to apply for.

Signature	
Name	
Date	