



Equestrian Western Australia
 State Equestrian Centre
 303 Cathedral Avenue
 BRIGADOON WA 6069
 P 08 9296 1200 F 08 9296 1194
 E members@equestrianwa.org.au
 I www.wa.equestrianwa.org.au
 ABN 53 591 481 584

Office Use Only
 Received Date Here

APPLICATION FOR AFFILIATION

1 January 2019 to 31 December 2019

Club Affiliate

Sport Affiliate

Commercial Group

ORGANISATION DETAILS

Organisation Name:			EWA Number:	
Postal Address:				
Suburb:		Postcode:		
Website:				

Has your organisation been affiliated with EWA before? Yes No

If yes, what year/s were you affiliated? _____

COMMITTEE DETAILS *(add more rows if required)*

Position	Name	Phone Contact	Email
e.g. President			

Primary Contact *(Please identify at least one primary contact from the above list to be used for EWA correspondence AND Website promotion)*

Name: _____

MEMBERSHIP DETAILS

Membership Type	EWA	Non-EWA	Total
Competitor – Senior			
Competitor - Junior			
Participant - Senior			
Participant - Junior			
Supporter - Official			
Other (please name):			

ACTIVITY DETAILS

Primary Activity (only select one)			
<input type="checkbox"/> Dressage	<input type="checkbox"/> Jumping	<input type="checkbox"/> Eventing	<input type="checkbox"/> Showhorse
<input type="checkbox"/> Para-Equestrian	<input type="checkbox"/> Vaulting	<input type="checkbox"/> General Riding	<input type="checkbox"/> Trail/Social Rides
<input type="checkbox"/> Driving	<input type="checkbox"/> Reining	<input type="checkbox"/> Endurance	<input type="checkbox"/> Pony Club
<input type="checkbox"/> Hunting	<input type="checkbox"/> EA Education	<input type="checkbox"/> Fundraising	<input type="checkbox"/> Stud Book
<input type="checkbox"/> Agistment	<input type="checkbox"/> Lessons	<input type="checkbox"/> Events	<input type="checkbox"/> Other

Additional Activities (select all that apply)			
<input type="checkbox"/> Dressage	<input type="checkbox"/> Jumping	<input type="checkbox"/> Eventing	<input type="checkbox"/> Showhorse
<input type="checkbox"/> Para-Equestrian	<input type="checkbox"/> Vaulting	<input type="checkbox"/> General Riding	<input type="checkbox"/> Trail/Social Rides
<input type="checkbox"/> Driving	<input type="checkbox"/> Reining	<input type="checkbox"/> Endurance	<input type="checkbox"/> Pony Club
<input type="checkbox"/> Hunting	<input type="checkbox"/> EA Education	<input type="checkbox"/> Fundraising	<input type="checkbox"/> Stud Book
<input type="checkbox"/> Agistment	<input type="checkbox"/> Lessons	<input type="checkbox"/> Events	<input type="checkbox"/> Other

DECLARATION – MUST BE SIGNED

I hereby make application with Equestrian Western Australia, and in doing so agree to be bound by the Rules & Regulations of the FEI and Equestrian Australia and all decisions of the Committees of the Branch.

Signed: _____ Position: _____

Print Name: _____ Date: _____

PAYMENT CATEGORY (please select appropriate category)

CLUB AFFILIATE **\$250.00**

SPORT AFFILIATE **\$150.00**

(National & State Associations ie PCAWA, RDA, Agricultural Societies, Breed Societies)

COMMERCIAL AFFILIATE **Price on Application**

PAYMENT TYPE

- I enclose a cheque payable to Equestrian WA.
- Please charge my credit card for the amount selected above:

Type of Card: (circle)	Visa	MasterCard	Expiry Date: ____ / ____	Cvv: _____											
Name on Card:				Signature: _____											
Card Number:															

**Please return to our Membership Officer Meredith Tenger at members@equestrianwa.org.au
or post to 303 Cathedral Ave, Brigadoon, WA 6069.**