



SOUTHERN HILLS PONY CLUB INC.

WILLUNGA

Mailing Address:
P.O. Box 56
Willunga S.A. 5172

APPLICATION FOR MEMBERSHIP

Grounds:
Railway Terrace
Willunga

2016-2017

Rider Name:	Date of Birth:
Parent/Guardian Name : (Voting rights if child member <16y)	
Address:	PIC# SA458986
Telephone:	
Email:	
Pony Club Grading (if known):	
Riding Experience:	
Horse name/age/experience:	

This membership application is for: Single Rider Family

Type of Membership

First family member Junior	12 month membership for first family member : 4-16y (Includes Affiliation fee to PCASA & insurance of \$83.25)	\$180	
Second/ Subsequent Junior	Riding brother or sister of the first riding member: 4 -16y (Includes Affiliation fee to PCASA & insurance of \$83.25)	\$95	
Associate or Senior Member	Associate: riders aged 17 to under 21 years Senior: riders aged 21 to under 26 years 12 month membership for riders aged 17 to under 21 years (Includes Affiliation fee to PCASA & insurance of \$83.25)	\$180	
Part Year	Part year membership (from 1 April to 30 June) . Any age. (Includes Affiliation fee to PCASA & insurance of \$54.70)	\$75	
Monarto Levy	Monarto working bee levy: For 2016-17 this is <u>non-refundable</u> and will be paid directly to Southern Zone for Monarto Centre maintenance. \$60 per rider.	\$60	
Adult	*Committee Member or parent/guardian of current financial member. A rider 26 yrs and over to join club, but may not take part in any Pony Club Competition, other than set down for this age group. (Yellow card)(Includes Affiliation fee to PCASA & insurance of \$70.05)	\$80	
Visitor Trial	Allows participation in a maximum of 3 rallies and or 3 months (includes instructor's assessment of rider/horse combination) \$30 refunded if full membership then paid.	\$60	
Strapper/Groom	A member of any age who doesn't have a horse & joins to be part of club & to prepare for efficiency levels to C standard in theory only until becoming a full riding member. (can only have 3 rides per year)	\$70	
		TOTAL	
Credits to be applied	\$50 Sports Vouchers per R-7 eligible children \$60 Monarto Levy where Working Bee hours completed for 2015/16 Other Credits to be applied		
CHQ made to: Treasurer, SHPC, PO Box 56, Willunga, 5172 or alternatively Southern Hills Pony Club bank details are BSB 105 108 Account Number 394074040		BALANCE	

Admin use only:

Payment received:	Paid by: Cash CHQ EFT	Received by:	Date:
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Additional Family Members joining:

First Family Member: _____

Name	Date of Birth	Horse's Name / age/education (or N/A if non rider & will just be visiting)

Your interests/ what would you like to occur at club:

Dressage		Western pleasure	
Trail riding		Mounted games	
Showjumping		Certificates/badges of achievement	
Eventing		Natural Horsemanship	
Social Activities		Other?	

General

Instructors you would like to be invited to club _____

Phone (if known)

Email address (if known):

We always need assistance. Could you help out with any of the following activities?

- ◆ I would like to be part of the rally planning team (meets twice a year)
- ◆ I would be one the general committee (meets once a month)
- ◆ Help out with the canteen (you decide when you can help)
- ◆ Be on the committee
- ◆ I am a qualified instructor or am interested in becoming one
- ◆ Sponsor
- ◆ Newsletter
- ◆ Other _____

◆ Web site

Any Other Feedback or Considerations:

RIDERS MEDICAL HISTORY FORM

Name: _____

The information you provide on this Medical History Form will be kept by SHPC in a secure place and will be used only in the event of an emergency.

Emergency Contact

1. Name: Relationship:
 Date of Birth:.....Address:.....
 Phone (1):Phone (2):

2. Name: Relationship:
 Date of Birth:.....Address:.....
 Phone (1):Phone (2):

Health Cover Details

Medicare No:Concession Card No:

Do you have Ambulance Cover? Yes No Ambulance No:

Do you have Private Health Cover? Yes No Fund:.....

Are there any conditions that the Riding Member may need to disclose that could affect them whilst taking part in organised Pony Club rallies and events? (i.e. Asthma, Heart conditions, Allergies, Diabetes)

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Note: Junior Riders (16years & under) MUST have a parent or appointed guardian present at Rallies and Events at all times.

Medical Release

Member over 18 years

If emergency medical care is required for myself and if I, or an accompanying spouse or relative, am not able to convey permission in a timely manner, then the undersigned authorises appropriate emergency medical care as deemed necessary by emergency medical personnel, a physician or the medical facility providing treatment.

Rider's Name:

Signature:Date:

Member under 18 years

If emergency medical care is required for my child and if permission is not available in a timely manner, then the undersigned authorises appropriate emergency medical care as deemed necessary by emergency medical personnel, a physician or the medical facility providing treatment.

Parent/Guardian Name:

Signature: Date:

MEMBER DECLARATION

Iagree to abide by the rules, regulations, policies, procedures and directives as stipulated by Pony Club Association of South Australia Competition rules and affiliated bodies.

I agree to abide by the constitution and By Laws of the Southern Hills Pony Club.

I acknowledge that horse sport is dangerous and that accidents causing death, bodily injury, disability and property damage can, and do, happen.

Southern Hills Pony Club is a small club dedicated to the development of riders of all abilities and ages in a friendly and relaxed environment. We ask that all families assist us by being ready to help with set up and pack up at rallies, working bees and with the running of our events throughout the year.

SHPC needs the support of all members to help us raise funds through our fundraising so we can keep our club fees as low as possible.

We, the members of the family, agree to assist the club at Rallies, Working Bees and Zone Events throughout the year.

I understand that as a member of the P.C.A.S.A Southern Zone that I have obligations to provide assistance with the following:

1. **Working Bee at Monarto** Equestrian Centre to the number of hours required by the club. The \$60 working levy will be *refunded on completion of work (3 hours per member).
*Note for 2016-17 there will be no refund due to payment required for Monarto Centre maintenance.

2. **Zone Finals** (August)

3. **Pentathlon** (February)

4. **State Championships/Francis Figwar** (June)

Failure to contribute may attract a ****Duty Not Fulfilled**** financial penalty invoiced, at the discretion of the Executive Committee. Failure to honour this penalty will void membership application.

*** Duty Not Fulfilled – Monarto Levy \$60 not refunded per riding member**

I acknowledge that I have read and understood the information provided within the membership form and members pack regarding Codes of Conduct and Privacy.

I give permission to SHPC to publish any appropriate photo or any other relevant information pertaining to my Pony Club activities. Yes No

Signed (Member).....Date:

MEMBER’S PARENT/GUARDIAN DECLARATION

Must be signed for all members under the age of 18 years.

I/we consent to our above named child becoming a member of the Pony Club Association of South Australia as a member of the Southern Hills Pony Club.

I/we have read and accept the Member Declaration on behalf of our child.

Signed:Date:

Signed:Date:

Payment Details Please return your completed form and cheque to the Treasurer, SHPC, PO Box 56, Willunga, 5172 or alternatively Southern Hills Pony Club bank details are **BSB 105 108 Account Number 394074040** if you prefer to do an EFT.

