

OFFICE USE ONLY:

Date Received

Show Horse Council WA Inc. ABN: 72076998511

P.O. BOX 1290 West Leederville WA 6901 | Email to: laneblack@bigpond.com

2020 / 2021 APPLICATION – NEW MEMBERSHIP / MEMBERSHIP RENEWAL

SHC WA Inc. is an affiliate of Show Horse Council of Australasia Inc.

Please read this application carefully, complete all required details and sign. The correct fee must accompany the application. Applications are to be forwarded directly to Show Horse Council WA Inc. If the Application is on behalf of a minor less than eighteen (18) years of age, then a parent/guardian is to sign.

Where a member/competitor is under the age of 18 years at least one parent or legal guardian must be a member of a SHC WA Inc.

PERSONAL DETAILS (ONE FORM PER MEMBER)				
I,			MEMBER No:	
Courtesy Title Given Name hereby apply for new membersh	Surname ip / membership renewal of SHC o	of WA Inc. (affiliat	te of SHC of Australasia Inc.)	
TYPE OF MEMBERSHIP	Please select one of the below (Ju	ınior members N	/IUST have a Parent member)	
ALL NEW MEMBERSHIP ADD JOINING FEE \$10				
ADULT ACTIVE ☐ \$130	JUNIOR ACTIVE ☐ \$100	NON-RIDER / NON-COMPETITOR ☐ \$50		
ADDRESS:		POSTAL ADDR	RESS (if different, eg PO Box):	
State: Po	stcode:	State:	Postcode:	
TELEPHONE:		PIC No:		
MOBILE:		If Applicant is a minor less than eighteen (18) years of age		
EMAIL:		Name of Parent Member:		
DATE OF BIRTH:		Parent Member Number:		
<u>I agree</u> to the following personal details bei		lagree to my contact details being supplied to selected stakeholders		
Register of National Saddle Horses (unless this section is completed, the information will NOT be visible): Name: YES NO Address: YES NO		in the Sport: YES I agree to SHC WA using my photo in Newsletter, website and their		
Telephone / Email: YES □ NO □		social media site: Y		
Affiliate. I further understand and agree that By-Laws, Policies and all relevant procedures me at https://www.showhorsecouncilaust.co Association for the period 01/07/2020 to 30 Horse sports are a dangerous activity and ho understand and acknowledge that serious injuil the risks involved, including risks associate risks, both known and unknown and I voluntasuffer that arises from my participation in homind altering drugs before and during the activity altoward activity and by law misconduct or refusal by me to follow any direction in the immediate removal from my horse NO MATT disability as a result of my failure to comply. I linc. or the Rules of any other affiliated organic consent to my nominated affiliate, The Show retaining and reproducing an image or likenes.	as developed and amended from time to time tom.au. I declare, in making this application, the 1/06/2021. by the session act in a sudden and unpredictable (chorury or death may result from horse riding active the dwith any health condition that I have. I agreed a rily PARTICIPATE at my OWN RISK and assuments sport activities. I understand and acknowled tivity and I take full responsibility for any injury before or during these activities. I agree to foll rection of any organiser or official can result in the second that and agree to wear a helmet at all times where requisation and agree that I am solely responsible for thorse Council of Australasia Inc., its affiliated	icil of Australasia Inc. (Shincluding but not limite interest I do not hold financial angeable) way, especial ities. Prior to undertaking that I ride at my own resole responsibility for a doge the dangers associal to with the directions of another CANCELLATION of responsibility for a compliance with a compliance with the compliance with the compliance and clubs at SHCA sanction from the sanction of the compliance and clubs at SHCA sanction from the compliance and clubs at SHCA sanction from the compliance and clubs at SHCA sanction from the compliance or payments.	HCA) I am bound by the SHCA Inc. Constitution, ed to the Social Media Policy made available to ial membership with another Affiliated ally if frightened or hurt. I, the undersigned ing any such activity, I will ensure I am aware of risk. I knowingly and freely assume all such any injury, death or property damage I may ated with their consumption of alcohol or any ated with their consumption. I agree not to may event organiser or official and that any may participation in these activities and my emay result in injury, death and/or permanent the the Rules of this Affiliate, the Rules of SHCA at take sole responsibility for my actions. The red events and their commercial partners taking, by such images or likeness may be used by any of each to me or them.	
Signed: Date: Date:				
	mpleted Membership Form is received and	payment has been s	uccessfully processed by SHC WA	
Payment Options: (PLEASE DO NOT SE	END CASH) Cheque made payable to	o SHC WA Inc. OR	Credit Card (add details below)	
Name on Card:	Signature		Tel No	
Card number:	/ / F	vn CCV	Amount \$	

Amount Received \$

Date added to Database

SHOW HORSE COUNCIL OF WESTERN AUSTRALIA (INC) 2020 / 2021 MEMBERSHIP YEAR MEMBER FEE SCHEDULE

Category 1	Adult			
NEW MEMBER	Joining Fee		\$10	
Period 1/7/20-30/6/21	ADULT ACTIVE/RIDING MEMBER		\$130	
		Total	\$140	
RENEWAL				
Period 1/7/20-30/6/21	ADULT ACTIVE/RIDING MEMBER	Total	\$130	
Category 2	Junior (Under 17 years of age)			
NEW MEMBER	Joining Fee		\$10	
Period 1/7/20-30/6/21	JUNIOR ACTIVE/RIDING MEMBER		\$100	
		Total	\$110	
RENEWAL				
Period 1/7/20–30/6/21	JUNIOR ACTIVE/RIDING MEMBER	Total	\$100	
Category 3 (see below)	Non-Active / Non Rider			
NEW MEMBER	Joining Fee		\$10	
Period 1/7/20- 30/6/21	NON-RIDER/NON-COMPETITOR		\$50	
		Total	\$60	
RENEWAL				
Period 1/7/20-30/6/21	NON-RIDER/NON-COMPETITOR	Total	\$50	

Category 3 Non-Rider/Non-Competitor Membership is for the applicant who DOES NOT ride a horse at ANY time, either for pleasure, exercise or training & DOES NOT COMPETE as a rider or hander of a horse in ANY competition or event.

Where a member/competitor is under the age of 18 years at least one parent or legal guardian must be a member of a SHCA Affiliate or Constituent Affiliate.

Applicants for New Membership/Membership Renewals should refer to the Member Insurance Brochure on the SHCA website www.showhorsecouncilaust.com.au for a summary of the cover automatically provided as a benefit of membership of an Affiliate of the SHCA.

PIC Number - Property Identification Code

The Western Australian brand and PIC register - refer to the Department of Agriculture and Food website

https://www.agric.wa.gov.au/livestock-movement-identification/livestock-ownership-identification-and-movement-western-australiia