

MEMBERSHIP APPLICATION FORM 2023

Please complete in BLOCK CAPITALS and return with membership fee to: Helen Grove, The Flat, Stourton Castle, Bridgnorth Road, Stourton, Stourbridge, DY7 5BG Email <u>BewdleyBridleClub2@gmail.com</u>

Our membership year runs from 1st Jan – 31st Dec. All membership will end on 31st Dec 2023

FEES FOR 2023

- Existing members £30.00 + £22.00 for each family member. Please enclose details and payment of each additional family member when completing your membership form.
- New members £32 + £22 for each family member
- Non riding members £22.00.
- Payment methods: Cash, Cheques Payable to "BBC" and Bank Transfer with reference "Mem 23" A/C N°: 50183156 S/C N°: 40-10-13
- A membership form must be sent with ALL forms of payment or your membership will not be processed.

We are always looking to improve our club. Please complete the part regarding instruction, competition and the level you are interested in on next form.

Should you have any additional constructive suggestions or comments please let us know by emailing BewdleyBridleClub2@gmail.com

REMINDERS

Can everyone who attends training please take emergency contact details with them either by wearing medical armband or pass to the trainer or BBC member organising.

We cannot run our events without the help of our members. EVERYONE WILL BE REQUIRED to help or provide a helper for at least one event.

As a club we only hold your data for club use. If you wish not to be named on our FB group/page or your photograph be used on FB and website please tick box on membership form.

As a club we do try to put on training to suit all, however, they are also dependant on venue and instructor. If you can complete the questions asked at the end of the membership form, this can help assist the committee to organise training.



MEMBERSHIP APPLICATION FORM 2023

Name & T	ïtle								
Address	6								
(inc. Post C	ode)								
Email Addr	ess								
Tel No.:									
Mobile No.:									
Type of Membership		Senior (+18) Junior (-18) Non Ridden Family							
Emergency Contact Details		Nam	e:						
		Contact No.:							
Signed:	-					Date:			
Please confirm payment method: Cheque / Cash / Bank Transf						Transfer	nsfer Amount Paid:		
F	Please 1	ick if y			h for your det 3 page/group		otographs	to be placed on	
P	lease t	ick if y	ou DO NC	T wa	nt any regular	communi	cation fro	m us via email	
Please circle c		•						ould like instructio	
Discipline		Dressage		Show Jumping		Cross Country		Other	
Level									
Disciplines ye competing in)	ou curi	rently	compete	<u>in;</u> (pl	ease state wh	nat level/he	eight you	are currently	
Discipline	Dressage		Show Jumping		Cross Country	Eve	enting	Other	
Level									
What days of	the we	ek wo	ould you li	ke to	see training	?			

<u>Level of competing for the Riding Club</u> (as either part of a team or an individual)

Area (Adult over 18's) Area (Junior) Mercian