

2018-19 Equestrian South Australia Affiliation Form

Affiliation Category *(required fields)*

<input type="radio"/> Club Affiliate	<input type="radio"/> Sport Affiliate	<input type="radio"/> Commercial Group
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Group Details *(required fields)*

Organisation name		New/renewing	<input type="radio"/> New	<input type="radio"/> Renewing
EA Affiliation no		Affiliation period		
Street address				
State		Post code		
Postal address				
State		Post code		
Contact number		Fax number		
Email address				
Website address				

Primary Contact Details *(required fields)*

Name	_____	Position	_____
President email	_____		
Phone (w)	_____	Phone (m)	_____

Personnel details *(required fields for Clubs and Sport Affiliates only)*

No. of office bearers	_____	No. of staff	_____
President name	_____	President phone	_____
President email	_____		
Secretary name	_____	Secretary phone	_____
Secretary email	_____		
Treasurer name	_____	Treasurer phone	_____
Treasurer email	_____		

Membership details *(required fields for Clubs and Sports Affiliates only)*

Total Club members	_____	No of non EA	_____	No of EA	_____
Club member type	_____	No of members	_____		
Club member type	_____	No of members	_____		
Club member type	_____	No of members	_____		
Club member type	_____	No of members	_____		
List the maximum number hosted by the club on any one activity day;					
Activity days	_____	Horses	_____		
Volunteers	_____	Spectators	_____		



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Activity details *(required fields)*

Primary activity	<input type="checkbox"/> Dressage	<input type="checkbox"/> Vaulting	<input type="checkbox"/> Driving	<input type="checkbox"/> Hunting	<input type="checkbox"/> Agistment
	<input type="checkbox"/> Jumping	<input type="checkbox"/> Show Horse	<input type="checkbox"/> Reining	<input type="checkbox"/> EA Education Programs	<input type="checkbox"/> Lessons
	<input type="checkbox"/> Eventing	<input type="checkbox"/> General Riding	<input type="checkbox"/> Endurance	<input type="checkbox"/> Fundraising	<input type="checkbox"/> Events
	<input type="checkbox"/> Para-Equestrian	<input type="checkbox"/> Trail/social rides	<input type="checkbox"/> Pony Club/ Mounted Games	<input type="checkbox"/> Stud Book	<input type="checkbox"/> Other:.....
Additional activities <i>(select all that apply)</i>	<input type="checkbox"/> Dressage	<input type="checkbox"/> Vaulting	<input type="checkbox"/> Driving	<input type="checkbox"/> Hunting	<input type="checkbox"/> Agistment
	<input type="checkbox"/> Jumping	<input type="checkbox"/> Show Horse	<input type="checkbox"/> Reining	<input type="checkbox"/> EA Education Programs	<input type="checkbox"/> Lessons
	<input type="checkbox"/> Eventing	<input type="checkbox"/> General Riding	<input type="checkbox"/> Endurance	<input type="checkbox"/> Fundraising	<input type="checkbox"/> Events
	<input type="checkbox"/> Para-Equestrian	<input type="checkbox"/> Trail/social rides	<input type="checkbox"/> Pony Club/ Mounted Games	<input type="checkbox"/> Stud Book	<input type="checkbox"/> Other:.....

Affiliation requirements

Along with this 2 page form, copies of the below must be provided as part of the affiliation application;

- 1. Club Constitution** – *(Commercial Groups exempt)*
- 2. Proof of Current Insurance** *(Club exempt – see note below)*
- 3. Risk Management Policy**
- 4. Bio-Security Policy**

Agricultural and Show Societies affiliated with the Agricultural Societies (ASC) in South Australia, which wish to conduct EA competitions, may affiliate with EA. On application and renewal, they must provide:

- 1. ASC Affiliation**
- 2. Proof of Current Insurance**
- 3. Risk Management Policy**

Affiliations will not be finalised until all paperwork has been received and accepted by the EA State Branch office.

Payment details

Fees:

CLUB AFFILIATES 3+ Events	\$370	CLUB AFFILIATES 1 -2 Events only	\$150
SPORTS AFFILIATES 3 + Events	\$370	SPORTS AFFILIATES 1 - 2 Events	\$175

Payment methods	1. Cheque	2. Credit Card		
	Please make cheques payable: Equestrian SA 10/ 2 Cameron Road Mount Barker SA 5251	Type:	<input type="checkbox"/> Mcard	<input type="checkbox"/> Visa
		Name:		
		Number:	_____/_____/_____/_____	
		Expiry:	___/___	
	CVC:	___		

PRINT NAME..... SIGNATURE

Date: