

**MEMBERSHIP APPLICATION FORM****1st November 2011 – 31st October 2012**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Town: \_\_\_\_\_

County: \_\_\_\_\_ Post code: \_\_\_\_\_ Tel: \_\_\_\_\_

Date of Birth (if under 17 years): \_\_\_\_\_

Type of Membership: (please tick)

Junior: (under 18 years): £15 Adult: (18 years plus): £18 

Please make cheques payable to "EWSHOT RIDING CLUB"

Completed application forms should be returned to:

Linda Boman, 17 Earlsbourne, Church Crookham, Fleet, Hants, GU52 8XG  
Tel: 07976 408169

As part of my membership of the club, I am willing to assist in preparing, dismantling, jump judging and generally assisting at shows. I do not object to data relating to me being held by Ewshot Riding Club. I agree that this data may be disclosed to the B.H.S. only.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

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