

Branch Membership Application Form 2008

PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS



The Pony Club

| Member's Names, with preferred Forename & Surname | Female / Male | Date of Birth | Age on 1/01/08 | Annual Subscription | Amount Due (£) |
|---|---------------|---------------|----------------|--------------------------|----------------|
| 1. | | | | £50.00 (£30.00*) | |
| 2. | | | | £50.00 (£30.00*) | |
| 3. | | | | £25.00 (£15.00*) | |
| 4. | | | | free | |
| 5. | | | | free | |
| 6. | | | | free | |
| | | | | Badge @ £2.00 | |
| | | | | Tie (17 & under) @ £5.50 | |
| | | | | Tie (18 & over) @ £8.00 | |
| | | | | Joining Fee | 1.00 |
| | | | | Branch Postage | 3.00 |
| | | | | Total | |

The annual subscription is £50 for each Member. Family membership, where there are more than 2 Members in one family, is charged at £125.00 regardless of the number of children in the family.

The subscription normally covers the period January 1st. 2008 to December 31st. 2008. However, new Members joining for the first time between September 1st. 2007 and December 31st. 2007, and paying the 2008 subscription rate will be entitled to Membership until December 31st. 2008.

*New Members joining for the first time after June 30th. 2008 are charged a reduced subscription of £30 (£75 for family membership), which covers them until December 31st. 2008.

Member's Address

Postcode _____ Tel _____ Fax _____

Email _____ Mobile _____

Parent/Guardian Name in Full _____

Address (if different) _____

Postcode _____ Tel _____ Fax _____

Email _____ Mobile _____

If the Branch details are printed overleaf, sign and send the form to the Branch Membership Secretary, with your cheque made payable to the Branch name as shown on the reverse of this form. Otherwise, sign and send the form to The Pony Club at the address shown at the foot overleaf. We will then enrol you into your local Branch.

Parental Consent- (Applicants aged over 18 may sign for themselves)

I would like those listed above to be enrolled in The Pony Club. I agree to my son/daughter/ward/myself taking part in Pony Club activities and understand that riding is a risk sport. I agree that they/I will be bound by the Rules of The Pony Club and that neither I nor they will hold the Club liable for any personal injury to the Members or injury to their ponies or loss or damage to any of their equipment. If emergency medical/dental or veterinary treatment is required in my absence, I authorise the appointed Pony Club official to obtain such treatment as they reasonably consider necessary. I hereby consent to The Pony Club keeping Membership details on a computer and using them for the purposes registered under the Data Protection Act and outlined on The Pony Club website at www.pcu.org

Signed Dated

Please enclose details of any relevant medical conditions such as diabetes, epilepsy, fainting etc. **If you have previously been a Member of The Pony Club please insert the name of the Branch or Centre here**

GIFT AID

As a registered charity, The Pony Club is able to treat the subscription as a donation, and to reclaim the notional tax under Gift Aid. We would be extremely grateful if you would complete the Gift Aid Declaration below, which will enable us to do this. Completing this declaration does not mean that you will have to pay any additional tax.

Please ensure that the Gift Aid Declaration is completed in full, as it will be detached from this Membership Form.

FOR BRANCH USE

| | | | | |
|-----------------------|----------------------|----------------------|----------------------|----------------------|
| Date received: | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Records Updated: | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Membership Card sent: | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Other items sent: | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Gift Aid: | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

GIFT AID DECLARATION

(Please complete this Declaration using Block Capitals)

On completion, the Branch should retain this Declaration until requested to send it to Pony Club Headquarters.

I (First Name & Surname)

of (address)

Postcode

declare that I have made a donation to The Pony Club (charity No 1050146) of £ _____* and wish it to be treated as a Gift Aid donation. I confirm that I pay an amount of Income Tax or Capital Gains Tax at least equal to the tax that The Pony Club will reclaim on my donations in the tax year.

*Enter the amount of your total donation, e.g. £50, £100, £125, or such donation that you have given.

Signed Date of Payment

Name(s) of Member(s)

Branch