



Drouin Pony Club Inc

Riding Membership Application Form

PO Box 210
Drouin Victoria 3818

www.drouinponyclub.org.au
secretary@drouinponyclub.org.au

Section 1 - Applicant's Details

Name _____
Address _____
Town _____ Postcode _____
Home Phone _____ Business Phone _____
Mobile _____ Date of Birth _____
Email _____ Occupation _____

Section 2 - Mother's/Guardian's Details

Name _____
Address _____
Town _____ Postcode _____
Home Phone _____ Business Phone _____
Mobile _____ Occupation _____
Email _____

Section 3 - Father's/Guardian's Details

Name _____
Address _____
Town _____ Postcode _____
Home Phone _____ Business Phone _____
Mobile _____ Occupation _____
Email _____

Section 4 - Correspondence Details

Name _____
Address _____
Town _____ Postcode _____
Home Phone _____ Business Phone _____
Mobile _____
Email _____

Section 5 - Previous and/or current pony club memberships	
Pony Club Name	Years of Membership
_____	_____
_____	_____
_____	_____

Section 6 – Pony club grading			
Dressage	Show Jumping	Combined Training	One Day Event
_____	_____	_____	_____

Section 7 - Other Riding Club Experience

Section 8 - Other Relevant Riding Experience

Section 9 - Relevant certificates attained

Section 10 – Detail any special needs or requirements for the applicant

Section 11 -Any other relevant information

Signature of Parent _____ **Date** _____

NB. Applicants 18 years and over may sign their own application form.

For Office use only	
Date of Receipt	Time of Receipt
_____	_____
Received by	Signature
_____	_____