

Equestrian Australia 2019 EQ Club Affiliate Application Form



This Form becomes a Tax Invoice on payment. Please copy for your records. (Branch ABN 79 598 577 242)

AFFILIATION CATEGORY: CLUB

EA Number	ORGANISATION NAME								
PRIMARY CONTACT DETAIL	S (required fields)								
NAME & LOCATION OF GROUN	IDS USED BY THE ORGANISATION								
SUBURB		POS	T CODE						
			<u> </u>						
POSTAL ADDRESS									
SUBURB		POS	T CODE						
WEBSITE									
Event Contact Name:									
Mobile:	Email:								
Mobile:	BlueCard No:	Expiry Date:							
Vice-President's Name:	Email: _								
Mobile:	BlueCard No:	Expiry Date:							
Treasurer's Name:	Email: _								
Mobile:	BlueCard No:	Expiry Date:							
Secretary's Name:	Email:								
Mobile:	BlueCard No:	Expiry Date:							
Name of your Local Gove	rnment: direct you to funding opportunities that may be in you	ur area)							
	rancet you to randing opportunities that may be in yo	di dica,							
,									
·	SURED WITH EA/GOW GATES)?								
	B (to be completed by clubs not insured by Go questrian sport in Queensland, Equestrian Queenslan	n Gates) I needs accurate statistics on participation levels for vo	arious						
demographic groups. It would be a	appreciated if you could fill in the statistics below to a	sist us in this important function							
TOTAL CLUB MEMBERS	NUMBER OF EA MEMBERS	NUMBER OF NON-EA MEMBERS							
CLUB ACTIVITY DAYS	JOINT CLUB/PARTICIPANT DAYS	COMPETITIVE DAYS							
AFFILIATION REQUIREMENT Along with this form, copies of the	TS All documents supplied below must be provided as part of the affiliation app	electronically to be emailed to: <u>admin@equestrianglington</u>	<u>d.com.au</u>						
Compulsory for all Affiliates	mast be provided as part of the anniation app	Recommended for all Affiliates							
EVIDENCE OF CURRENT IN	CORPORATION	BIOSECURITY POLICY & PLANS							
	RANCE (if insurance is not held through EA/Gow	BLUE CARDS FOR EXECUTIVE COMMITTEE							
Gates club insurance sche	•	RISK MANAGEMENT POLICY & PLAN							
	CLUB CONSTITUTION (for New Clubs or Changes)								

AFFILIATIONS WILL NOT BE FINALISED UNTIL ALL PAPERWORK HAS BEEN RECEIVED AND ACCEPTED BY THE EA STATE BRANCH OFFICE.

- All clubs/shows holding official classes must first submit their show dates to the specific discipline committee.
- Once dates are approved, please supply EQ with a copy of show dates & event programs to advertise online.

				ST & ACTIVITY DETAILS (ti evelopment and co-ordinate wit			rther services	to our Affiliates.			
	Dressage		☐ Vaulting ☐ I		Interschoo	Interschool					
	Jumping		Show Horse O		Other	Other					
	Eventing			☐ Driving							
PAYMENT DETAILS 2019 Affiliation Fees: (see table bel											
Club		Groups, Clubs				\$270.00					
DISC	OUNT AVAILABLE	TO CLUBS ONLY IF PA	AID BY	′ 31 JANUARY 2019.							
(INC	LUDES GST)	2019 Fee		-15% -25%		-25%	-30%				
Club	Club \$270			\$229.50	\$202.50		\$189				
CLUB DISCOUNT (Available to Affiliates that renew before 31/01/19) EQ Club Affiliates are eligible to receive a discount of up to 30% off the EQ Affiliate fee. (Please tick) Random checks will be completed throughout the year to ensure you are complying. You must meet the following criteria to qualify:											
YOU MUST MEET ALL OF THE FOLLOWING CRITERIA TO RECEIVE A 15% DISCOUNT OFF YOUR RENEWAL FEE											
1	Our club has an up to date risk management policy and biosecurity plan and ensures it is implemented										
2	Blue cards are held by all members of the club committee										
3	At least one memb	er of the club committee	has a	ttended a biosecurity workshop,	webinar in the	e last year					
4	Our club will send	all official/participant cor	npetit	ion entry checks and official resu	ılts to the EQ o	office					
	IN ADDITION	TO THE ABOVE CRITER	IA, SE	LECT ANY 4 OF THE FOLLOWIN	IG CRITERIA	TO RECEIVE A 259	% OFF YOUR	RENEWAL FEE			
1	Our club uses only	EA accredited coaches fo	r our t	training days							
2	50% of participants competing at our club/events are EQ members										
3	At least 50% of our events are open to EQ members as participant or official competitions										
4	At least 2 members of the committee have completed the following 'Play By The Rules' online courses: Child Protection; Complaints Handling, Harassment & Discrimination										
5	At least 2 members of the committee have completed the following 'Play By The Rules' online courses: Member Protection Information Officer										
6	At least 1 member of the committee has attended the Member Protection Information Officer workshop										
7	Our club has held at least 1 EQ education forum/seminar in the last year (i.e. course designers clinic, jump judges clinic, dressage education seminar)										
8	At least 2 members	s of our club committee l	nave w	ratched a minimum of 1 Equestri	an Queenslan	d webinars					
9	Our club has a volu category for the EC		place	and/or we have nominated/will	nominate a m	nember of our club	in the volunt	eer			
10	Our club has an ass	set management process									
11	Our club has comp	leted the ASC Club Healt	h Chec	k							
DISC	OUNT IF YOU MEE	THE FOLLOWING CRIT	ERIA	9% DISCOUNT OFF YOUR RENE	WAL FEE, YO	U ARE ELIGIBLE T	TO RECEIVE A	FURTHER 10%			
1	100% of participan	ts competing at our club	/event	s are EQ members							
Further information about the above criteria, including links to any webinars and courses are available on the club pages of the website: http://www.qld.equestrian.org.au/content/club-discount-scheme											
Ve hereby apply for Affiliate membership of the Equestrian Australia (EA), Equestrian Queensland Inc. (EQ) and agree to be bound by the Rules and											
egula	tions of FEI, the EA	, Equestrian Queenslan	a and	all decisions of the Board of Ec	luestrian Que	ensiana.					
	Signature:			Date:	//_						
Return: Equestrian Qld, Sports House Milton, 150 Caxton St, MILTON, Q 4064 or email admin@equestrianqld.com.au (If you wish to pay by direct deposit, please send this completed & signed form along with a request and we will email you the bank details.) Payment Details: {PLEASE NOTE: IF PAYING BY CARD AN ADDITIONAL 1.5 % BANK CHARGE WILL APPLY}											
PLEAS		ENT BY CREDIT CARD	. 14016		nature	JAIN CHARGE	WILL AFFLI)				
ТҮРЕ	OF CARD	□ VISA	I	☐ Mastercard ☐ Bank	card	EXPIRY D	/				
NAM	E ON CARD:					· · · · · · · · · · · · · · · · · · ·					

CARD NUMBER: