

Equestrian Australia 2024 EQ Club Affiliate Form



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

AFFILIATION CATEGORY:

Club Affiliate

EA Number (Office Use)	AFFILIATE NAME					
DIMARY CONTACT DETAILS (*********	l folde)					
OCATION OF GROUNDS USED:						
OCATION OF GROUNDS USED.						
POSTAL ADDRESS:						
POSTAL ADDRESS:						
		POST CODE:				
Event Contact Name:						
Mobile:	Email:					
COMMITTEE DETAILS						
President's Name:						
Mobile:	Email:					
BlueCard No:		Expiry Date:				
Vice-President's Name:						
Mobile:	Email:					
BlueCard No:		Expiry Date:				
Treasurer's Name:						
Mobile:	Email:					
BlueCard No:		Expiry Date:				
Secretary's Name:						
Mobile:	Email:					
BlueCard No:		Expiry Date:				
NAME OF LOCAL GOVERNMENT AUTHORI (This information is to enable us to direct y		that may be in your area)				
MONTH OF YOUR AGM (DATE):						
NAME OF INSURER (IF NOT INSURED WIT	H EA/MARSH INSURANCE B	ROKERS)? Marsh/EA Other				
		Evniny Dato:				

All information contained in this document will be dealt with in accordance with the EQ Privacy Policy. This Policy may be viewed at https://www.qld.equestrian.org.au/content/policies-and-bylaws

MEMBERSHIP DETAILS OF CLUB (to be completed by clubs)

As part of its function	to promote equestrian sport in Queensland, Equestrian Queensland needs accurate statistics on participation levels for various	us
demographic groups.	It would be appreciated if you could fill in the statistics below to assist us in this important function	

TOTAL CLUB MEMBERS		NUMBER OF EA MEME	BERS		NUMBER OF NON-E	A MEMBERS		
CLUB ACTIVITY DAYS		JOINT CLUB/PARTICIPA		COMPETITIVE DAYS				
RIMARY CLUB ACTIVITIES	: AREA OF INTERE	ST & ACTIVITY DETAI	LS (tick all the	nt apply)				
☐ Dressage ☐ Jumping ☐ Eventing		☐ Vaulting ☐ Show Horse ☐ Driving			☐ Interschool ☐ Other			
AFFILIATION REQUIREME Along with this form, copie	s of the below docu	uments <u>must</u> be provid						
COMPULSORY FOR A		<u>'</u>						
PROOF OF CURRENT INSURANCE (certificate of currency)			1—	☐ EVIDENCE OF CURRENT INCORPORATION (for new Clubs) ☐ CLUB CONSTITUTION (for New Clubs or Constitutional Changes)				
	All documents sup	plied electronically to	be emailed to	enquiries@	@equestrianqld.com.	<u>au</u>		
Statutes and Regula a) Fédération Eq b) Equestrian Au c) The Branch. The FEI's Statutes and Reg Equestrian Australia's Sta Website). The Branch's Statutes and The Applicant acknowled, under Equestrian Australia cease in the circumstance	ations) of: questre Internation questralia. gulations are availa tutes and Regulati d Regulations are a ges that the rights a's national insura	ons are available on E vailable upon reques and benefits of mem nce programs and use	site, at https:, Equestrian Au t made to the bership of Eq e of all Eques	ederation for //www.fei.c stralia's wel e Branch. uestrian Austra trian Austra	or the sport of eque org/ (FEI Website). bsite, at https://ww stralia and the Branch li	estrianism. w.equestrian.och (including a ntellectual Pro	org.au/ (EA s to coverage	
Signature:					Date:			
PAYMENT DETAILS (after	r 31 Dec 2023)				2024 Aff	iliation Fees:		
Club Affiliation						\$310.00	İ	
If you wish to pay by direct Can we ask that you o	email a copy of you FINALISED UNTIL T	Name E BSB (Account No 0. Description A r banking remittance	Equestrian Qu 1984 004 2651 1255 Effiliate Name advice of payn OF PAYMENT, IVED BY THE I al Form becom	& EA No. nent, showir THE COMPI EQ OFFICE. nes an invoic	ETED FORM & ALL R			
CREDIT CARD DETAILS	{PLEASE NOTE: AN	I ADDITIONAL 1.5 % BA	NK CHARGE V	VILL APPLY	TO ALL CREDIT CARE	OS}		
TYPE OF CARD	U VISA	<u> </u>	Mastercard		EXPIRY DAT	TE		
NAME ON CARD:							-	
CARD NUMBER:								