



**MEMBERSHIP APPLICATION FOR THE PERIOD 1ST January – 31ST DECEMBER
2016**

SAEF Club Registration Number: FS0001

Email: chairman@fsec.co.za
Fax: 0866696771

Title: _____ Initials: _____ Surname: _____

Name: _____

Date of Birth: DD/MM/YYYY ID:

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FEI Licence Nr. (leave blank if N/A): _____

Gender: M / F

Postal Address: _____ Postal Code: _____

Residential Address: _____ Postal Code : _____

Region: _____ Province: _____

Cell: _____ Tel(H): _____ Tel(W): _____

Fax: _____ Email: _____

Do you have a disability: YES / NO

If yes, please describe and attach doctor's certificate or Classifying Card:

Do you have membership to another equestrian club: YES / NO

If yes, where and in what province: _____

Please indicate the category of membership required by marking the appropriate box with an X.

Birth certificates are required for Pony Rider and Junior Members. In the case of a Parent/Guardian not being a Participating member they need to join as a Guardian member at NO CHARGE.

Please fill in a separate form for each member joining

Club Fee's (Pick one – COMPULSORY)

Adult Competitive Member	R150.00	
Pony Rider/Junior Competitive Member	R100.00	
Guardian/Social Member/Non-Competitive Owner, Official or committee member	R0.00	

Club Entrance Fee (COMPULSORY)

Club Entrance Fee	R200	
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Please transfer this amount to the BANK ACCOUNT OF THE FSEC:

FNB

ACCOUNT NO: 62413148299

BRANCH: PRELLER PLEIN 230234

Please attach a proof of payment to your application form

I have read, and agree to abide by the current FSEC Constitution, as well as the Club rules and regulations in force and amended from time to time, should my application be approved.

I under take to inform the club office of any changes in my particulars, especially my address and e-mail address.

I understand that routine communication from the office will be to my registered e-mail address, in line with the electronic communication policy of the SAEF.

SIGNED: _____ WITNESS: _____

DATE: _____

(IF UNDER 18 THEN PARENT OR LEGAL GUARDIAN MUST SIGN)