

# Solihull Riding Club



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01564 770180

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## MEMBERSHIP APPLICATION\* or RENEWAL

Complete the details below and take or send to the Office enclosing payment.  
Renewals complete name and any details which have changed since last year.

<b>Title:</b>		<b>SURNAME:</b>	
<b>FORENAME:</b>		Date of Birth:	
Address Line 1:		Daytime Tel:	
Address Line 2:		Evening Tel:	
Town / City:		Mobile Tel:	
Postcode:		EMAIL:	

<b>EMERGENCY CONTACT</b>	Name:	Relation:
Daytime:	Evening:	Mobile:

### MEMBERSHIP TYPE: (Please circle)

<b>JUNIOR RIDING</b> <i>Under 18 at 1<sup>st</sup> January</i>	<b>SENIOR RIDING</b> <i>Over 18 at 1<sup>st</sup> January</i>	<b>NON-RIDING</b> <i>Former Riding Members</i>
<b>PARENT or GUARDIAN</b> <i>If Junior is under 14 at 1<sup>st</sup> January their Parent or Guardian must join if not already Senior Member in another category.</i> P/G Name:..... Address:..... ..... ..... P/code:..... Tel No(s):.....		<b>GROUND / DOG WALKING</b> Dog Type & Name:..... Car Type & Reg No:.....
		<b><u>PAYMENT TYPE(s):</u> (Please circle)</b> CASH    CHEQUE    CREDIT / DEBIT CARD    VOUCHER STANDING ORDER (Date to start from:                    )

I hereby agree to be bound by all Rules, Regulations & By-Laws of the Solihull Riding Club Constitution.

In addition we would like to keep you up to date on News / Events / Facility hire and other items which may be of general interest. Please tick how we may contact you: By post  and/or by email

Signature: (or Parent/Guardian of Junior under 14)..... Date:.....

Proposed\* by Member name:..... Signature:.....

Seconded\* by Member name:..... Signature:.....

\* **Applications** must be proposed/seconded by current Members – Riding applications by Equestrian Members, others by any type. (Proposer/Seconder not necessary for **Renewals**)

FOR OFFICE USE ONLY:

Duration: Expires:	6 Months / 12 Months	SRC Mem No:		BRC Mem No:	
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