

BRANCH MEMBERSHIP FORM 2020



SECTION 1 - PARENT / GUARDIAN DETAILS

Title	Name		
<input type="text"/>	<input type="text"/>		
Address			
<input type="text"/>			
Postcode	Home Phone	Mobile	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Email			
<input type="text"/>			

SECTION 2 - MEMBER DETAILS

Please select your preferred membership type:

Individual

£80 per riding member

£36 per non-riding member

Family

£200 total (maximum 5 members)

Member 1	Member's Name	Gender	Date of Birth	Riding <input type="checkbox"/> Non-Riding <input type="checkbox"/>	
	Member's Email (optional)	Member's	Mobile (optional)	Photographic Rights* Yes <input type="checkbox"/> No <input type="checkbox"/>	Third Party Contact** Yes <input type="checkbox"/> No <input type="checkbox"/>
Member 2	Member's Name	Gender	Date of Birth	Riding <input type="checkbox"/> Non-Riding <input type="checkbox"/>	
	Member's Email (optional)	Member's	Mobile (optional)	Photographic Rights* Yes <input type="checkbox"/> No <input type="checkbox"/>	Third Party Contact** Yes <input type="checkbox"/> No <input type="checkbox"/>
Member 3	Member's Name	Gender	Date of Birth	Riding <input type="checkbox"/> Non-Riding <input type="checkbox"/>	
	Member's Email (optional)	Member's	Mobile (optional)	Photographic Rights* Yes <input type="checkbox"/> No <input type="checkbox"/>	Third Party Contact** Yes <input type="checkbox"/> No <input type="checkbox"/>
Member 4	Member's Name	Gender	Date of Birth	Riding <input type="checkbox"/> Non-Riding <input type="checkbox"/>	
	Member's Email (optional)	Member's	Mobile (optional)	Photographic Rights* Yes <input type="checkbox"/> No <input type="checkbox"/>	Third Party Contact** Yes <input type="checkbox"/> No <input type="checkbox"/>
Member 5	Member's Name	Gender	Date of Birth	Riding <input type="checkbox"/> Non-Riding <input type="checkbox"/>	
	Member's Email (optional)	Member's	Mobile (optional)	Photographic Rights* Yes <input type="checkbox"/> No <input type="checkbox"/>	Third Party Contact** Yes <input type="checkbox"/> No <input type="checkbox"/>
Total Membership Fee Due					

SECTION 3 - BRANCH FEE

Some Branches charge a Branch Fee in addition to membership. The fee may already be filled in below, but if not please check with your Branch.

Branch Fee	Number of memberships	Total Branch Fee Due	Grand Total Due (Membership Fee + Branch Fee)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

***PHOTOGRAPHIC RIGHTS**

Members and their parents/guardians give permission for any photographic and/or film or TV footage taken of persons or horses/ponies taking part in Pony Club activities to be used and published in any media whatsoever for editorial purposes, press information or advertising by or on behalf of The Pony Club and/or official sponsors of The Pony Club. I understand that The Pony Club will select photographs/footage for publication with care and respect for those shown. **Please indicate above whether or not you consent to photographic rights for each Member.**

****CONTACT ABOUT THIRD-PARTY OFFERS AND EVENTS**

The Pony Club may wish to contact you by email with information about third-party events and activities, and the activities of its partners (who are both commercial businesses and organisations such as the British Equestrian Federation). Only The Pony Club will send this information in order to meet the legitimate interests of The Pony Club and its partners. **Please indicate above whether or not you are happy to receive this content for each Member.**

Please return this completed form to **Cheshire Hunt South** Branch of The Pony Club

Membership Sec Karen Kirk, The Oaks, Cross o' th' Hill, Malpas, Cheshire. SY14 8DH

SECTION 3 - EMERGENCY CONTACT DETAILS

Emergency Contact Name

Emergency Contact Phone Number

SECTION 4 - PREVIOUS BRANCH/CENTRE

If any of the members joining have previously been a member of another Pony Club Branch/Centre, please enter the details below:

Previous Branch/Centre

SECTION 5 - DECLARATION

The person with parental responsibility for the Member(s) should review and sign the following declaration.

- I, the undersigned, agree to the person(s) named overleaf being enrolled as a Member of The Pony Club and agree to abide by the rules as published in the Handbook.
- I understand that riding is a risk sport and accept that my son/daughter/ward/I will be taking part in Pony Club riding and associated activities explained to me by The Pony Club Official/Coach/Riding School Proprietor.
- I agree that they/I will be bound by the Rules of The Pony Club and neither I nor they will hold the Club liable for any personal injury to the Members or injury to their ponies or loss or damage to any of their equipment.
- I agree to abide by any rules regarding safe and correct riding equipment (including footwear and hats) that my son/daughter/ ward/myself must wear.
- If emergency medical/dental or veterinary treatment is required in my absence, I authorise the appointed Pony Club Official to obtain such treatment as they reasonably consider necessary.
- I, the undersigned, understand that The Pony Club will:
 - not share my personal information with a third party for the purposes of them contacting me directly, unless I give sepa-rate permission above.
 - share some personal information with its partners for data analysis/research and development purposes. Any organisa-tion that personal information is shared with will have to comply with the requirements laid out under the General Data Protection Regulation for handling personal data.
 - use the personal data I provide for its registered purposes and as outlined in the privacy policy on The Pony Club website at www.pcuk.org

Signed (person with parental responsibility): _____

Date: _____

SECTION 6 - GIFT AID

As a Registered Charity, The Pony Club is able to treat the subscription as a donation, and to claim the national tax under Gift Aid. We would be extremely grateful if you would complete the Gift Aid declaration below, which will enable us to do this. Please ensure the Gift Aid declaration is completed in full, as it will be detached f rom this membership form.

For the donation amount, please enter the total value of the membership fees paid overleaf.

I want to Gift Aid my donation of £ _____ and any donations I make in the future or have made in the past 4 years to The Pony Club. I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference.

Name of Donor: _____

Postcode: _____

Address: _____

Signed _____

Date _____

Please notify the charity if you want to cancel this declaration, change your name or home address or no longer pay sufficient tax on your income and/or capital gains. If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.

Name of Branch: _____

Name of Member(s): _____