

## APPLICATION FOR COMPANY MEMBERSHIP

British Showjumping, Meriden Buisness Park, Copse Drive, Meriden, West Midlands CV5 9RG E-mail: membership@britishshowjumping.co.uk Website: www.britishshowjumping.co.uk Tel: +44 (0) 2476 698800

Membership only valid once confirmation is received in writing from British Showiumping

Membership only valid o		nom british showju	mpmg	
NAME OF COMPANY	The company is entitled to one named agent who is eligible for complimentary			
	HAVE YOU EVER BEEN	g membership. Please fill out the following details.  YOU EVER BEEN MEMBERSHIP NO.		
MEMBERSHIP NO.	A MEMBER BEFORE?		•	
	YES NO			
ADDRESS	NAME OF AGENT MR/MRS/MISS/OTHER			
	ADDRECC			
	ADDRESS			
	TEL:			
TEL:	FAX:			
TEL:	EMAIL:			
FAX:				
EMAIL:	DATE OF BIRTH / /			
	PUBLICATIONS		TICK	£
TOTAL TO PAY	DDITICH CHOWII IMDING			FREE
£ Please refer to current price list.	BRITISH SHOWJUMPING			FREE
PREFIXES				
If you wish to add a prefix to horse's registered, the fees outlined	EQUINE ANTI-D	OPING AND	CONTR	ROLLED
below will be applicable. For horses that hold an FEI passport please see rule 50.70.6	MED	MEDICATION RULES		
passport picase see rate 50.7 0.0	(Mandatory – application will not be processed if not completed)			
1-5 horses £510.00	I agree to be bound by the BEF Equine Anti-Doping and Controlled Medication Rules			
6+ horses £815.00	and the BEF Anti Doping Rules for Human Athletes as amended from time to time copies of which can be found on the British Equestrian Federation Website at <a href="https://www.bef.co.uk">www.bef.co.uk</a> and will be supplied to me in paper format on request.			
TERMS AND CONDITIONS OF MEMBERSHIP OF BRITISH SHOWJUMPING On becoming a member of British Showjumping Lagree to be bound by the Memorandum and Articles	In the event that the person applying for membership is under 18 the parent or legal guardian signing on behalf of that person specifically agrees to accept primary responsibility for that person's compliance with the BEF Equine Anti-Doping			
(available on application or the website) and all Rules, Regulations and Bye-laws thereunder and I agree to be bound by the Rules laid out in the official Rules and Year Book of British Showjumping which is revised	and Controlled Medication Rules and that parent or guardian will be the Person Responsible for any Horse ridden vaulted or driven by that person for the purposes of those Rules.			
and published annually and I agree that the decisions of the Executive Board Stewards and other competent authorities of British Showjumping given in accordance therewith shall be binding upon me and I Authorise my				
name to be placed on the Register of Members of British Showjumping.  I wish to become a member of British Showjumping of the type ticked above. I agree to abide by the terms and	Date			
conditions laid out above.	Print Name (Last Name, First Name)			
Please contact the office within 3 working days of submission to make payment. Your membership will not be live until payment is taken.				
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How did you find out about us?	Signature  (if the person applying is under 18 the form must be signed by the parent or legal guardian)			
Marketing Permissions	(			
British Showjumping will use the information you provide on this form to be in touch with you and to provide	le updates and marketing. Please let us k	now all the ways you	would like to	hear from us:
British Showjuming email newsletter containing marketing/promotional offers and content				
British Showjumping on behalf of third party emails				
Direct Email				
Contact by phone for marketing purposes				
Should a journalist wish to speak to you for reporting purposes are you happy for us to release your details	Yes No			
You can change your mind at any time by clicking the unsubscribe link in the footer of any email you receive information with respect. For more information about our privacy practices, please visit our website. By subn				