

Equestrian NSW



Equestrian NSW (ABN 17 157 619 696) and Equestrian Australia (ABN 19 077 455 755) PO Box 7077, Wetherill Park BC NSW 2164

Ph: 02 9620 2660 Email: info@ensw.org.au Website: www.nsw.equestrian.org.au

This form becomes a Tax Invoice on payment. Please copy for your records

Sport Affiliate – Show Society Application Form 2022 – 2023

Show	Society Details (re	equired fields)				
Shov	v name		N	ew/renewing	o New	o Renewing
EA A	ffiliation no		A	ffiliation period		<u> </u>
Stree	et address					
State		P	ost code			
Post	al address		·			
State			P	ost code		
Contact number			Fo	ax number		
Emai	il address		·			
Web	site address					
Prima	ary Contact Details	s (required fields))			
Nam				osition		
emai	il				l	
-	ne (w)		P	hone (m)		
	Primary activity	o Jumping	o Show Horse	o Dressage		
Affiliat We he	Affiliations will not be tion Acknowledgement ereby apply for Affilia to be bound by the	<u>nt</u> ate membership o	f Equestrian Austra	lia (EA), Equestria	an New South \	Wales (ENSW) and
	Wales. nclose our affiliation	ı fee of \$				
		-				
Signature:			Signature:			

Date: ____/___





** PLEASE ENSURE ALL DETAILS ARE COMPLETED **

Please contact the ENSW office of	on 02 9620 2660 if wishing to	pay by bank transfer	
OR			
Please accept my cheque/money	order made out to Equestr	an NSW for \$	
OR			
Please charge my credit card: Visa Mastercard Number: Number:	J	Expiry date:/	CCV:
Name on Card:			
Signature/Authorisation:			
Being for: Affiliation – Show Society		\$91	
	тот	AL PAID: \$	
Please note however that affilion appropriate fee. The Equestrian will accept that their membersh	n NSW affiliation year runs		
Office Use Only:			
Date received:	Receipt No:		