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ABN 80 362 146 367

## **APPLICATION FOR AFFILIATION**

## MEMBERSHIP YEAR 01/07/2019 - EXPIRES 30/06/2020

Affiliate Details (PLEASE PR	INT IN BLOCK LETTERS) L Ne	ew L Rene	ewal
Organisation			Name:
Contact Person:			Position:
Postal Address			
		Post	Code:
Telephone: (BH): (	)		AH: ()
Mobile:			Email:
	affiliated with EV before? No	Yes Previous	s #
,			
Primary Contact Details (	required fields)Name		
· ·			
PH:	PH(M)		
Development details (very ired	d fields for Clubs and A		
Personnel details (required	• •		
	No. of Staff PH No		
	Secretary Ph .		
	Secretary Fit		
Treasurer email			
<b>Membership details</b> (Requir			
	No of non EA	<del>-</del>	
Club member type			No of members
• •			
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• •	No of r		
i iot tha mavimum numbar ba	osted by the club on any one activit	•	
	Horses	S	
Activity days			
Activity days	Specta	ators	
Activity days	Specta	ators	
Activity days Volunteers Income Status (Required fie	Specta elds for Clubs only)	ators	
Activity days Volunteers Income Status (Required fie Professional Please list all (o	Specta elds for Clubs only)	ators	
Activity days Volunteers Income Status (Required fie Professional Please list all (d	Specta elds for Clubs only) other than tuition):		

Activity details (required fields)

Primary activity (only select one)	0 0 0	Dressage Jumping Eventing Para- Equestrian	0 0 0	Vaulting Show Horse General Riding Trail/social rides	0 0 0	Driving Reining Endurance Pony Club/ Mounted Games	0 0	Hunting EA Education Programs Fundraising Stud Book	-	Agistment Lessons Events Other:
,										
Additional activities (select all that apply)	0 0 0	Dressage Jumping Eventing Para- Equestrian	0 0 0	Vaulting Show Horse General Riding Trail/social rides	0 0 0	Driving Reining Endurance Pony Club/ Mounted Games	0 0	Hunting EA Education Programs Fundraising Stud Book	0 0 0	Lessons

### **Affiliation requirements**

Along with this 2 page form, copies of the below must be provided as part of the affiliation application;

- **1. Proof of Current Incorporation** (Certificate and/or Proof of your Last Annual Statement lodged)
- 2. A copy of your Constitution
- 3. Club Constitution (Commercial Groups exempt)
- **4.** A copy of Public Liability Insurance Certificate of Currency. (MUST be for \$20,000,000 or more with a minimum of 12 months coverage)
- 5. A copy of Risk Management Policy and Manual.
- **6.** A description of club activities, including: The nature and number of active days of club events.
- 7. A Full list of all the members of your club.
- 8. In completing this affiliation form, all clubs seeking affiliation, recognise and acknowledge that ALL affiliated events dates, regardless of discipline, must be ratified by the respective Equestrian Victorian Discipline Sub-Committee prior to publication or advertisement.

Affiliations will not be finalised until all paperwork has been received and accepted by the EA State Branch office.

#### DECLARATION – THIS MUST BE SIGNED

I hereby make application with Equestria Regulations of the FEI and Equestrian Au X	stralia and all decisions of	the Committees of the	Branch.
Signature	Position He		Date
All Fees Include GST			
	Renewal Fees	New Fees	
Agricultural / Show Society:	\$195	\$225	
Club:	\$295	\$325	
Sport Affiliate /Schools:	\$295	\$325	
Commercial:	\$1750	\$1750	
Payment Details: I enclose a cheque	for \$	payable to E	questrian Victoria
	Or		
Char	ge my: VISA / MASTER	RCARD	
Cardholder Name:	Signature	):	

	club operates and what it aims to achieve.
	What is your clubs stated purpose?
2.	<b>Club Volunteer Management Policy</b> All affiliated clubs must ensure a positive working environment for volunteers, tick where appropriate
	Your club has a designated Volunteer Coordinator
	Your club provide volunteers with free volunteer packs
	Your volunteers are provided with food and drink
	Your volunteers are reimbursed for expenses
3.	Club Facilities Please include information with regards to the equestrian facilities utilised by the club for their various events.  Do you have your own club facilities?
	Yes – please tick appropriate Leased Owner
	Complete venue details- facilities eg address, stables, number of arenas, equipment owned etc.
	No
	What other venues do you utilise for your events (eg. Name the club/facility you use)

1. Club Mission and Purpose

Key features of a well-run club is that its members have a clear understanding of how the

4.	<b>Equestrian Victoria Standards-</b> please tick to acknowledge your clubs compliance
	All affiliation fees are paid on time in accordance with EV procedures
	All clubs and events are expected to display the EV logo in programs, websites, newsletter and any other publicity documentation.
	All events are conducted by EA registered NCAS Coaches, judges and officials
	The club Public Liability Insurance standards meet EV's requirements
	A first aid kit is on site at all club events
	A first aider is on site at all Show Jumping, Dressage and Show Horse events and an ambulance is present at all Eventing events (as per EA rules).
	Has your club got procedures in place regarding Working with Children Checks?
	The club maintains a full record of all members' information and demographics
	In completing this affiliation form, all clubs seeking affiliation, recognise and acknowledge that ALL affiliated events dates, regardless of discipline, must be ratified by the respective Equestrian Victorian Discipline Sub-Committee prior to publication or advertisement.

A full list of all of your club members MUST be supplied.

# **Check List** ✓

Please make sure you supply the following with your application or it will be sent back and not processed:

1. Completed Application Form with payment including all fields filled out and the application signed.
2. Proof of Current Incorporation (Certificate of Incorporation and/or Proof of your Last Annual Statement lodged)
3. A copy of your Constitution. If you have already provided this document to our office please tick here
4. A copy of Public Liability Insurance Certificate of Currency. (MUST be for \$20,000,000 or more with a minimum of 12 months coverage)  You must supply the certificate your insurance company supplies to you that names your club as the policy holder. A copy of a tax invoice OR the companies policy is not enough.
5. A copy of Risk Management Policy and Manual. If you have already provided this document to our office please tick here
6. A description of club activities, including: The nature and number of active days of club events.
7. A Full list of all the members of your club.