|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Details - Person Responsible for the Horse (must be aged 18 or over)** | | | | | |
| Surname |  | Given Name | |  | |
| Address | | | | | |
| Email |  | | | | |
| Mobile Ph |  | | | | |
| Occupation |  | | | | |
| **Details - Rider** | | | | | |
| Surname |  | | Given Name | |  |
| Date of Birth |  | | Number of years riding | |  |
| Previous PC or Riding School (if any) |  | | PC Certificate Level (if any) | |  |
| **Details - Horse** | | | | | |
| Name |  | | Age | |  |
| Height |  | | Gender | |  |
| Last Wormed |  | | Colour | |  |
| Any dietary considerations (e.g. weight management): | | |  | | |
| **Declaration** | | | | | |
| * I understand and accept the grazing terms and conditions attached to this application * I agree to pay all grazing fees to Te Atatu Pony Club bank account on the 1st of every month or at a frequency arranged with the Treasurer.   Te Atatu Pony Club Bank Account: 12 3038 0243060 000 | | | | | |
| Signed |  | Date | |  | |

*Please read and sign this document, then send to* [*membershipenquiriestapc@gmail.com*](mailto:membershipenquiriestapc@gmail.com) *along with the Grazing Terms & Conditions. Keep a copy of the Grazing Terms & Conditions for your records*