



PO BOX 8161, MOUNT GAMBIER EAST SA 5291

## 2016 MEMBERSHIP APPLICATION

**SURNAME:**

**GIVEN NAME:**

**ADDRESS:**

**TOWN:**

**STATE:**

**POSTCODE:**

**EMAIL:**

**PHONE:**

**MOBILE:**

**FAMILY \$50**

**SENIOR \$30**

**JUNIOR \$20**

**NON RIDER \$15**

**Please list all extra names for family membership:**

**Declaration: I/We agree to be bound by the Rules and By-Laws of the Mount Gambier Showjumping Club Inc.**

**SIGNATURE:**

**DATE:**

**To be signed by parent or guardian if applicant under 18 years.**

**Please make cheques payable to 'Mount Gambier Showjumping Club Inc' or**

**Bank details: BSB: 633 000, Account Number: 141138446**

**Please return application to the above address.**