

**YGARC MEMBERSHIP APPLICATION FORM**

2024/2025 financial year



YGARC

1<sup>st</sup> November 2024 to 31<sup>st</sup> October 2025

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

1378 Melba Highway

Yarra Glen VIC 3775

<b>Membership Type:</b>  <input type="checkbox"/> Renewal <input type="checkbox"/> New HRCav Member <input type="checkbox"/> Associate Membership	<b>HRCav Membership Number (if applicable)</b>  # _____	<b>Dressage Level (if assessed):</b>  _____
<b>Are you currently a HRCav Member of another club?</b>  <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>If yes, which club are you a member with?</b>  Club: _____	<b>Has HRCav insurance been paid with your other club?</b>  <input type="checkbox"/> Yes <input type="checkbox"/> No

**Personal Details:**

Name		DOB	
Mailing Address		P/code	
Home Phone		Mob	
Email Address			

**Fees:** (Tick where applicable)

YGARC Membership Fee	Annual Fee	\$50	<input type="checkbox"/>
HRCav Levy and Insurance <i>Not applicable when joining as associate member</i>	Annual Fee	\$170	<input type="checkbox"/>
Chaff Chat Magazine – 12 months hard copy (Optional)	Fee	\$120	<input type="checkbox"/>
<b>Total Fees Payable</b>		<b>\$ _____</b>	

## YGARC MEMBERSHIP APPLICATION FORM

2024/2025 financial year

I desire to become a member of the Yarra Glen Adult Riding Club Inc, in the event of my admission as a member, I agree to be bound by the rules of the association for the time being in force.

Print Name: ..... Signature: ..... Date ...../...../.....

### **Payment Details:**

Payment may be paid:

- at rallies to the **Secretary or Treasurer** only
- **by Direct Transfer – Bendigo Bank BSB: 633000 Account No: 159712561.**

Receipt No: .....

Ensure that your name is in the transfer details.

- **by cheque** payable to: Yarra Glen ARC. Payment and Membership forms should be sent to:  
**YGARC Secretary**  
**1378 Melba Highway**  
**Yarra Glen VIC 3775**

**If you have any queries, please feel free to contact the YGARC Secretary:**

[yarraglen.arc@outlook.com](mailto:yarraglen.arc@outlook.com)

### **Declarations & Privacy:**

I hereby apply for membership to the **YARRA GLEN ADULT RIDING CLUB** Inc and I agree to abide by the clubs rules and regulations and that of the HRCav.

I acknowledge and agree to:

- Wear an approved helmet when mounted and appropriate footwear at all times
- Recognise that YGARC is dependent upon its members and will assist in a voluntary capacity at official events as required.
- Assist in rally duties as required.
- Accept that horse riding is a hazardous and dangerous sport, and I indemnify YGARC against any claim for injury I may suffer while I am engaging in this sport or any club activities.

I provide permission for: (Please Circle)

- The HRCav to provide my personal details to any HRCav sponsor? Yes No
- My name and phone number to be printed in our club Newsletter? Yes No
- Photo/s of either my horse or myself being published on the club's website or newsletter? Yes No

I give permission for Committee members to drive my car and take my horse home in case of an accident

- ☐ Yes
- ☐ No

### **Requirements for membership \_**

It is a requirement that all members of the club provide assistance to the club in the following ways throughout the year:

- Assist at club competitions for a minimum of 3 hours.
- Perform rally duties throughout the year as specified by roster or ring drag.