

c/o Barbados Olympic Association, Wildey, St Michael Email:barbadosequestrian@gmail.com

MEMBERSHIP RENEWAL FORM 2024 PLEASE PRINT ALL INFORMATION

NAME:(Please add Name, Age and Date-of-Bird					•••••
ADDRESS:					••••
OME TEL. NO: WORK TEL. NO:			CELL:		
E-MAIL: This is important for you to receive informations of the control of th					
This is important for you to receive informati	ion ana circuiar	s from the b. E.F	t in a timety manner as the preferred	memoa is vii	л етин.
MEMBERSHIP FEES			HORSE & PONY REGISTRATION FEES		
Discounted Membership and Horse & Pony	Registration Fee	es available if fo	rms and payment are received befo	re 31 st Januar	ry, 2024
	<u>Fee</u> ✓	<u>Discount</u> ✓		<u>Fee</u> ✓	<u>Discount</u> ✓
Full Individual Membership (Senior or Junio	r) \$200.00	\$150.00	1-3 Horses: Fee per Horse/Pony	\$95.00	\$70.00
Family Membership	\$275.00	\$225.00	4-8 Horses: Fee per Horse/Pony	\$75.00	\$50.00
Day Membership	\$50.00		9+ Horses: Fee per Horse/Pony	\$55.00	\$40.00
(Anyone over 18 years of age must be a Full Individual Member)			B.E.A. Passport	\$40.00	
OPTIONAL ADDITIONAL INSURANCE Barbados Olympic Association, through through their Insurance Program for B.	-			ional medica	al coverage Total
Annual Fee per Person Covered Enrolment Forms Attached (Please complete and return a separate form for each person covered)				\$50.00 No. Forms	\$
Riders competing in all shows in 2024 will be conentries for a show will be considered the deadlinalso be BEA registered to compete in BEA Shows.	e for payment of				
Please note Riding Schools must provide a list of h	orses they wish re	egistered (those t	hat might compete either in Jumping or	Dressage durin	g 2024).
The B.E.A adheres to the Code of Conduct adopted persons involved in International Equestrian Sport Your manner should be diplomatic, non- Your behaviour must be impeccable at a	t and we expect your confrontational a	ou to adhere to th nd polite at all tii	nis Code of Conduct. mes and during all circumstances.	se are applical	ole to all
FAIR PLAY: The following are excerpts from the Int Solidarity Committee which emphasizes ➤ That everyone be aware that integrity, so ➤ Know the rules of the game and play by	sportsmanship and	d honesty are stil	the most important elements of any sp	-	Olympic
Signature of Member			Date		
For Official Use Only					
Type of Membership: Ar			Date Received:		
B.O.A. Insurance: Ar	mount Paid:		Forms Received:		

FAMILY MEMBERSHIP DETAILS Please provide details of competing members below (PLEASE PRINT): NAME:_____ AGE (@ 1ST JANUARY 2024): _____ AGE (@ 1ST JANUARY 2024): ______ DATE OF BIRTH (DD/MM/YYYY):_____ DATE OF BIRTH (DD/MM/YYYY):_____ NAME:_____ NAME:____ AGE (@ 1ST JANUARY 2024): _____ AGE (@ 1ST JANUARY 2024): _____ DATE OF BIRTH (DD/MM/YYYY):_____ DATE OF BIRTH (DD/MM/YYYY):_____ **RIDING SCHOOL DETAILS** Please provide the horses/ponies' names that are being registered under the riding school (PLEASE PRINT): RIDING SCHOOL: _____ 1. NAME:_____ 8. 2. NAME: ______ NAME:----9. NAME:_____ 3. NAME: _____ 10. NAME: _____ 4. NAME: _____ 11.

<u>Note</u>: Members are responsible for having horse Passports up to date with all markings, relevant vaccines, ownership, etc. Horses competing internationally must have a valid official FEI Passport, while horses that compete locally, just need a BEA Passport.

12.

13.

14.

Payment Options:

• Third party transfer to the details below, along with this form and B.O.A Insurance Forms, completed and scanned to beatreasurer@gmail.com:

NAME:_____

First Caribbean International Bank (Barbados) Limited Beneficiary Name: Barbados Equestrian Association

Beneficiary Account: 76003036

5. NAME:_____

6. NAME: _____

Transit Number: 09616 Branch: Rendezvous (09616) SWIFT Code: FCIBBBBB

• This Form and B.O.A Insurance Forms along with Cheques made out to "Barbados Equestrian Association" can be mailed to: The BEA Treasurer, C/O The Barbados Olympic Association, Wildey, St Michael. but please note that the membership will commence on the date received.