



President: Jodie Thompson  
C/O Great Western P/O Victoria 3377  
Email: president@grampiansridingclub.com.au

### MEMBERSHIP RENEWAL FORM 2007/08

Name:..... HRC AV Member #.....

Address:.....

Postal Address:.....

Email Address:.....

Phone # (H).....(W).....(M).....

Membership Type: (please circle)      *Junior*                      *Senior*                      *Newsletter Subscription*

#### Emergency Details

Contact Name:.....

Contact Phone Number: (H).....(M).....

Doctors Name:..... Phone #:.....

Relevant Emergency Health Details:.....

Vets Name :..... Phone #:.....

Do you have any objection to your mailing details being given to the HRC AV's Sponsors? (Please Circle)

Yes                      No

Do you have any objection to your contact details being used for committee contact list ? (Please Circle)

Yes                      No

I agree to abide by all the rules of the Grampians Riding Club inc. and HRC AV, attend all Working Bee's and help at fundraising events run by the Club.

Junior members (17 years and under) are required to have a Parent / Guardian with them while attending club rallies and competitions at all times.

In the event of a person being injured an ambulance will be called and said person will be responsible for all charges and costs

It is HIGHLY RECOMMENDED That all riders wear medical armbands while mounted on club grounds

Signature:..... Date:.....

Parent / Guardian Signature if Junior Member:

..... Date:.....

Please send completed forms and payment to:

**The Treasurer**  
**Grampians Riding Club inc**  
**C/O Great Western P/O**  
**Great Western Victoria 3377**