

# CENTRAL COAST DRESSAGE ASSOCIATION INC

Affiliated with the Equestrian Federation of Australia and Dressage NSW

## Membership Application / Renewal

For The Financial Year 1<sup>st</sup> January 2016 to 31<sup>st</sup> December 2016

Please list Member Names for this application	DOB (if Junior)	EA Number	
<b>Address:</b>			
	<b>Postcode:</b>		
<b>Phone (AH):</b>	<b>Phone(Mob):</b>		
<b>Email address:</b>			
<input type="checkbox"/> I would like to receive the CCDA Newsletter in hard copy (newsletters will otherwise be emailed).			
<b>I/We hereby apply for (please tick):</b>			
<input type="checkbox"/>	Adult	Adult membership/renewal of the Central Coast Dressage Association Incorporated	\$10.00
<input type="checkbox"/>	Junior	Junior Membership/Renewal of the Central Coast Dressage Association Incorporated (must be under 16 years of age at 1 January 2016)	\$10.00
<b>Membership Enclosed (cheque/money order)</b>			<b>\$</b>
<b>I agree to be bound by the rules of the Association for the time being in force.</b>			
Signature of applicant .....			
Date.....			
If under 18 years of age, application must be co-signed by parent/guardian .....			
Date .....			
<b>I will contribute to the CCDA at events by:</b>			
<input type="checkbox"/> Pencilling	<input type="checkbox"/> General Duties	<input type="checkbox"/> Scoring	
<input type="checkbox"/> Gear Checking	<input type="checkbox"/> Collecting Test Papers	<input type="checkbox"/> Judging	
<input type="checkbox"/> Other (please specify)			
<b>Cheques should be made payable to CCDA Inc. and mailed with your Application / Renewal form to:</b>		<b>The Membership Secretary, CCDA Inc.</b>	
		<b>Melanie Conditis</b> <b>PO Box 1357</b> <b>Gosford</b> <b>NSW 2250</b>	