

**INGATESTONE AND BLACKMORE RIDING CLUB**  
**MEMBERSHIP APPLICATION FORM 2018**

Please return this form to: IBRC, Alex Hart, 18 Parklands Drive, Chelmsford, Essex, CM1 7RJ  
Enquiries to [ibrc\\_committee@hotmail.com](mailto:ibrc_committee@hotmail.com)

Name:.....

Date of Birth:.....

Address:.....

Post Code: ..... Parents/Guardian Name (if Junior).....

Tel Eve: ..... Mobile: .....

**Please provide a clearly printed e-mail address as we will send newsletters and schedules out electronically to get the information to you much more quickly.**

E-mail:.....

Horses Name: ..... Height.....

Winnings: SJ: ..... Dressage: ..... HT:.....

Would you like to be considered for Club Teams: YES / NO

Show jumping	Up to what height .....
Eventing/Hunter Trials	Up to what height .....
Dressage	Level Prelim / Novice / Elementary (delete as applicable)

Club members will be asked to provide a few hours help at shows – please indicate which discipline you would like to help at, please delete as applicable:

Dressage: Yes / No                      Show jumping: Yes/No                      Cross-country: Yes/No

Cheques made payable to IBRC OR payment by bank transfer to IBRC A/c no 16618084, Sort code 60-04-46.  
Please use name as payment reference.

Please indicate the class of membership required:

Full Membership                      £30.00

Full Family Membership:                      £15.00 per extra family member (must be family NOT friends)

Please list additional family members below:

Name: ..... DOB: ..... Horse:.....

Email : .....

Name: ..... DOB: ..... Horse:.....

Email : .....

*Please Note: You are only eligible to compete for one Liaison Club between 1st January 2018 and 31st December 2018. In the case of qualifying events for the National Championships your horse/pony must be fully vaccinated against Equine Influenza to 81-/S Rules and be accompanied with a descriptive vaccination certificate stamped and signed by a veterinary surgeon. Please check with Team Managers or Chairperson if you are not sure.*

SIGNATURE: ..... DATE:.....

**Parent or Guardian if under 18**