



## APPLICANT DETAILS

FIRST NAME	
LAST NAME	DATE OF BIRTH * / /
Have you been a member of ESNZ before or Bulletin subscriber?	
<input type="checkbox"/> No <input type="checkbox"/> Yes - ESNZ Membership Number: # <input type="text"/>	
EMAIL *	
PHONE (DAY) ( )	MOB
ADDRESS *	
	POSTCODE

\* Compulsory fields - applications without these details will not be processed.

Please indicate your primary discipline \*

- |  |  |
|--|--|
| <input type="checkbox"/> Dressage        | <input type="checkbox"/> Endurance / CTR       |
| <input type="checkbox"/> Eventing        | <input type="checkbox"/> Jumping / Show Hunter |
| <input type="checkbox"/> Para-Equestrian |  |

## DECLARATION \*

"I hereby agree to abide by the general rules and regulations of Equestrian Sports New Zealand Inc." For a full copy of these please refer to [www.nzequestrian.org.nz](http://www.nzequestrian.org.nz)  
"I also agree to abide by the respective Discipline, show or area rules as applicable."

SIGNED *	DATE / /
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Please complete if the rider is under 18 years  
"I hereby give my consent for the rider to compete as listed above."

SIGNATURE OF PARENT / GUARDIAN

## ESNZ FEES

Please indicate which products you are applying for

	Cost	Totals
Membership card required: (Membership cards will not be sent unless requested) <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Full Member	\$120.00	\$ <input type="text"/>
<input type="checkbox"/> Full Member- Child (14 years and under at 1 August)	\$80.00	\$ <input type="text"/>
<input type="checkbox"/> Full Member - Non Competing Official/Volunteer	\$60.00	\$ <input type="text"/>
<input type="checkbox"/> Introductory Member	\$40.00	\$ <input type="text"/>
<input type="checkbox"/> Urgent application fee (if required within 48 hours between Aug & Jan)	\$20.00	\$ <input type="text"/>

## PAYMENT OPTIONS

Please indicate which payment option you will use

**Direct Credit**      Use your member number as reference  
First-time members please use full name

Account No.: 06 0645 0074840 04      DATE PAID  
/ /

When making payment by Direct Credit please make sure to notify us of payment by returning this form via email or post.

Membership Application Total

\$

**Credit Card**      2.5% transaction fee applies

NAME ON CARD

CARD TYPE      EXPIRY DATE  
/ /

CARD NUMBER

**Cheque**      Payable to: Equestrian Sports New Zealand