SCHOOL AFF	ILIATION		VICTORIA
2024/2025	NEW RENEWAL		170 K Road, Werribee South Vic 3030 PO Box 616 Werribee Vic 3030
Please print in blo	P: +61 3 9013 0707 E: info@equestrianvictoria.com.au ABN: 80 362 146 367		
AFFILIATE DETAILS:			
Organisation Name:			
Contact person:		Position:	
Postal Address:		PostCode:	
Phone:	Email:		
Website:			
Has your organisatior	n been affiliated with EV before? Yes	No Pro	evious #
PRIMARY CONTACT	DETAILS:		
Name :	F	hone :	
Position :	Email :		
EVENTS:	pes of events that will be hosted.		
	es of events that will be hosted.		

ACTIVITY DETAILS (REQUIRED FIELDS):

EQUESTRIAN VICTORIA

APPLICATION FOR SPORT AFFILIATE /

	Dressage Driving Stud Book
	Jumping Reining Agistment
	Eventing Endurance Lessons Events
Primary Activity	Para-Equestrian Pony Club/Mounted Interschool
(Only select one)	Vaulting Hunting Trail/Social Rides
	Show Horse EA Education
	General Riding Fundraising
	Other

AFFILIATION REQUIREMENTS

Along with this application form, copies of the following must be provided as part of the affiliation application:

- 1.A copy of Public Liability Insurance Certificate of Currency. (MUST be for \$20,000,000 or more with a minimum of 12 months coverage)
- 2.A copy of Risk Management Policy including Biosecurity Policy & Plan.

Affiliations will not be finalised until all paperwork has been received and accepted by the EA State Branch office.

DECLARATION - THIS MUST BE SIGNED

I hereby make application with Equestrian Victoria, and in doing so agree to be bound by the Rules and Regulations of the FEI and Equestrian Australia and all decisions of the Committees of the Branch.

Signature:	Position held:	
	Date:	

FOR SPORT AFFILIATE / SCHOOL affiliation: \$349.00

CHECKLIST:

Please make sure you supply the following with your application to avoid a delay in processing.

1	1. Completed Application Form with payment including all fields filled out and the application
	signed.

2. A copy of Public Liability Insurance Certificate of Currency.(MUST before \$20,000,000 or more with a minimum of 12 months coverage)

You must supply the certificate your insurance company supplies to you that names your organisation as the policy holder. A copy of a tax invoice OR the company's policy is not enough.

3. A copy of Risk Management Policy. If you have already provided this document to our office please tick here

4. A full list of the types and number of events hosted

Enclose chequ	e/money order for \$ payable to Equestrian Victoria or I authorise p amount from my: VISA or MASTERCARD	payment of the above				
ardholder Name:	Signature:					
Card:						
xpires:		CVC:				