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**Membership Form 2020**

***Please fill out the form and send it by post along with appropriate fee   
made payable to ‘Side Saddle Ireland CLG’ to the membership Secretary, address below.***

🞏 **Adult Member**

🞏**Intermediate Member**   **€55.00**

**(Any riders who have attained their 20th birthday on the 1st January 2020, attending any event)**

|  |  |
| --- | --- |
| **Name:** |  |

🞏 **Junior Member**

A *junior membership must be accompanied by an adult membership,*

*(Either their parent, or the owner of their pony)* **€35.00**

**(Riders who have not attained their 20th birthday on the 1st January 2020)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name:** |  | **Date of Birth:** |  | **Age:** |  |
| **Name:** |  | **Date of Birth:** |  | **Age:** |  |

Non riding membership

🞏 Judge

🞏 Owner

🞏 Adult Non Rider *(accompanying junior membership)* €35.00

|  |  |
| --- | --- |
| **Name:** |  |

**PLEASE PRINT CLEARLY, ESPECIALLY THE EMAIL ADDRESS**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Total fee enclosed: €** | | | **Date** | | | | |
| **Postal Address:** | |  | | | | | |
|  | |  | | | | | |
|  | |  | | | | | |
| **Contact Telephone Number:** | | | | |  | **Email:** |  |
| **Mobile Telephone Number:** | | | |  | | **Fax:** |  |
| **Signature:** |  | | | | | **Date:** |  |

**Are you interested in attending training clinics? Yes** 🞏 **No** 🞏

**Do you currently have your own saddle?****Yes** 🞏 **No** 🞏