



BSJA JERSEY APPLICATION FOR WINTER HEIGHTS MEMBERSHIP

Winter Heights Membership Categories & Fees: Adult Member (AWM) £15 Junior Member (JWM) £15

RIDER'S NAME		ADDRESS			
Date of Birth (Juniors only)					
HOME TEL		MOBILE		EMAIL	

I hereby apply to be admitted as a BSJA Jersey member. If admitted, I agree to abide by the Constitution of BSJA Jersey, the rules and regulations as set out in the BJSJA Rules and Year Book, the BSJA Jersey Local Rules and all rules as outlined on schedules for BSJA Jersey shows. I agree to the above details and details of my horses or ponies which are registered by me being held on computer, and I agree to the above names being entered into a register which is available to all BSJA Jersey members.

Signed.....Date.....
(to be signed by all Seniors applying for membership) The parent or guardian must sign this section for any junior member.

I, being the parent/guardian of give consent for the Jersey Evening Post to publish the name of my daughter/son in the event that a photograph of him/her at a BSJA Jersey event is used in the newspaper.

Signed.....Date.....

As you all know, in order to successfully run shows throughout the season we rely on the help and support of our members, without whom these events would not run. However, there are a number of members who do not provide help duties at events, and for this reason the Committee have to take a stronger stance. We have therefore included the following declaration on the annual registration forms, so that every member is clear on their responsibility in relation to helper duties. In 2017/18 the Committee will be refusing entries for those members who do not provide help duties, hopefully this will mean that we do not need to call upon those members that help at every event, while others do nothing.

I, as a member of BSJA Jersey (or parent/guardian of a junior member) do hereby agree to provide a helper at any BSJA event throughout the season, to undertake a helper duty per horse/pony I compete (ie if two horses/ponies 2 helper duties). Failure to undertake a helper duty will result in my entries for future events being declined until such time as a helper duty has been undertaken.

Name.....Signature.....Date:.....
Please note that if the declaration is not completed and signed the registration form will be returned.

NAME OF HELPER: TEL NO:
PREFERRED DUTY (PLEASE CIRCLE): SET UP / ARENA PARTY / COLLECTING RING / SECRETARY
ARE YOU QUALIFIED IN FIRST AID, AND IF SO, ARE YOU PREPARED TO DO THIS DUTY? YES/NO

This application form, with a cheque for £15 payable to BSJA Jersey, should be sent to:
CLARE RICHMOND, TY-NEVEZ, RUE DE BECQUET VINCENT, TRINITY, JE3 5FH
Please allow a minimum of 3 days for your membership to be processed.