



# Globe Derby Pony Club Inc.

101 Daniel Avenue,  
Globe Derby Park SA 5110

Email: globederbypc@hotmail.com  
Facebook: Globe Derby Pony Club

## NEW MEMBER MEMBERSHIP APPLICATION – 2022 / 2023

Name: \_\_\_\_\_ Date of birth:     /     /     Age: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

### FEES

Membership Category	Fee Structure	Amount	Total Fee	Please ✓
Riding Member	PCASA	\$ 57.00		
	Travel Fund	\$ 4.00		
	Insurance	\$ 32.60		
	Pony Club Australia	\$ 16.50		
	GST	\$ 6.10		
	Globe Derby PC	\$ 33.80	\$ 150.00	<input type="checkbox"/>
Non-Riding Member	PCASA	\$ 4.00		
	GST	\$ 0.40		
	Globe Derby PC	\$ 20.60	\$ 25.00	<input type="checkbox"/>
Groom / Strapper	PCASA	\$ 29.46		
	Insurance	\$ 32.60		
	GST	\$ 2.94		
	Globe Derby PC	\$ 15.00	\$ 80.00	<input type="checkbox"/>
Reduced Riding Member Only from 1 <sup>st</sup> April to 30 June	PCASA	\$ 31.05		
	Travel Fund	\$ 4.00		
	Insurance	\$ 32.60		
	Pony Club Australia	\$ 16.50		
	GST	\$ 3.50		
	Globe Derby PC	\$ 12.35	\$ 100.00	<input type="checkbox"/>
Club Transfer	Globe Derby PC	\$ 25.00	\$ 25.00	<input type="checkbox"/>

ORS Sports Voucher - \$100.00 (off of your full fee '\$150' Riding Membership Fee) From 2022  
Only applies for school aged children up to Year 9 with one application per calendar year per child.

### PLEASE NOTE Members under the age of 18

At least one parent/guardian of a rider under 18yrs MUST hold at least  
Non-Riding Membership of Globe Derby Pony Club – (see fee's)

**GDPC Inc. Commonwealth Bank. BSB – 065 502. Acct - 10472045.**  
**Please put invoice number or surname as reference.**

**A separate form for each member must be filled out.**

## **MEMBER DECLARATION**

I agree that it is my responsibility to ensure I understand, adhere to, and uphold all the rules, regulations, policies, procedures, by-laws and directives as stipulated by the Pony Club Association of Australia, the Pony Club Association of South Australia, the Metro Zone Pony Club, the Globe Derby Pony Club and the Globe Derby Equestrian Centre.

I agree to assist in the successful running of the GDPC by providing assistance at club events and/or functions. This can include, but is not limited to, working in the canteen, maintenance and working bees, rally set up and pull down, events and fundraising as well as other activities as required by the Club from time to time.

I agree that members under the age of 18 years **MUST** have a parent or guardian in attendance at GDPC events and/or rallies at all times, unless prior arrangements have been made. I understand that if details are not supplied to the event and/or rally organizers prior to starting myself or my child may not be permitted to ride. I agree that at least one parent/guardian of a rider under 18yrs **MUST** hold a minimum Non-Riding Membership of GDPC and be in attendance at all GDPC events and/or rallies at all times.

I understand that GDPC is a member of the PCASA Metro Zone, and as a member of the GDPC I have an obligation to provide assistance with Zone Events throughout the year.

I understand that I am solely responsible for my health and medical safety in relation to any medical conditions listed on the Members Medical Form. I acknowledge that I am physically capable of participating in organised Pony Club rallies and/or events.

I acknowledge that horse sports are dangerous and that accidents causing death, bodily injury, disability and property damage can, and do, happen.

I acknowledge that I have read and understood the information provided within the GDPC Welcome pack, Membership Application form and Member Declaration.

### **Social Media**

I agree to abide by the GDPC, PCASA and PCA Social Media Policy, and to be aware of all comments made by me or my associate on all forms of social media and agree not to bring myself, the club, the zone or PCASA into disrepute.

I give permission to GDPC to publish any appropriate photo or any other relevant information pertaining to my Pony Club activities.            Yes             No

### **Pony Club Australia Database (Just Go)**

I agree to use PCA Database – Just Go to pay my fees, keep a record of my pony club certificates and purchase items. I understand I will need to add my name, address, phone #, email and date of birth to use this database.

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Members Name:

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Signed:

Date:            /            /

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### **MEMBER'S PARENT/GUARDIAN DECLARATION**

#### **Must sign for members under the age of 18 years.**

I consent to my above-named child becoming a member of the Pony Club Association of South Australia as a member of the Globe Derby Pony Club.

I have read and accept the information provided within the GDPC Welcome pack, Membership application form and Member Declaration on behalf of my child.

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Parent/Guardian Name:

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Signed:

Date:            /            /

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## MEMBERS MEDICAL FORM

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### Members Name:

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The information you provide on this Medical History Form will be kept by GDPC in a secure and confidential place and will be used only in the event of an emergency.

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### Emergency Contacts

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(1) Name: Relationship:

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Phone #1: Phone #2:

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(2) Name: Relationship:

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Phone #1: Phone #2:

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### Health Condition Details

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Does the above named member have any medical conditions or allergies that could affect them whilst participating in organised Pony Club rallies and/or events? (ie. Asthma, Seizures, Heart conditions, Allergies, Bee stings, Diabetes etc.)

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**Note: Riders (18years & under) MUST have a parent or appointed guardian present at Rallies and Events AT ALL TIMES.**

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### MEDICAL RELEASE DECLARATION

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#### Must be signed by all Members

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#### A parent/guardian must sign for members under the age of 18 years.

I understand that I am solely responsible for my / my child's health and medical safety in relation to any medical conditions listed above. I acknowledge that I am / my child is physically capable of participating in organised Pony Club rallies and/or events. In the event that emergency medical care is required, I authorise appropriate emergency medical care to be provided as deemed necessary.

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Members Name:

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Signed: Date: / /

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Parent/Guardian Name:

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Signed: Date: / /

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