

**NOOSA EUMUNDI DISTRICT DRESSAGE
MEMBERSHIP APPLICATION**

2010

Surname: First Name

Address & P/code:

Phone: e-mail Address:

I wish to be contacted via - *e-mail* *post*

Medical/Allergies/Disabilities:

In the event of a medical emergency at a NEDD event the organizers will contact the Qld. Ambulance Service to ensure any injured parties receive prompt professional attention.

Emergency contact person: Phone:

If under 18 years of age please include Date of Birth:/...../..... And signature of

Parent or guardian:Date:

Membership Fees:

Special Fee for 2009 NEDD Members:	Single	\$40.00	
	Additional Family members*	\$20.00	
New NEDD Members:	Single	\$50.00	
	Additional Family members*	\$25.00	
Non-Riding Members:		\$30.00	

TOTAL = \$

***Additional Family Member details:**

Name:	Age:	EFA Member No.	QISEA No.
	DOB:
Name:	Age:	EFA Member No.	QISEA No.
	DOB:
Name:	Age:	EFA Member No.	QISEA No.
	DOB:

QISEA Members - which school does your child represent?

NEDD is a small club and is reliant on direct support from its members to help organize and run its competition days. Please indicate below the 2 activities you/ your family will be providing assistance:

- Writing for judge's Scoring Arena setup Arena take down
- Willing to participate as a Committee member

Please post fees to Secretary NEDD, 646 Cootharaba Road, Cootharaba Qld. 4565

Please note: A completed Waiver Form must accompany this Membership Application.