



PO Box 6146, Wellington
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Application for Member Organisations

Organisation Name: _____

Contact Name: _____

Contact Role within Organisation: _____

Address: _____

Phone: _____ Fax: _____ Mobile: _____

E-mail: _____

Check List – have you completed the following: -

- Evidence of your organisation's legal status.
- A summary of your organisation's purpose and medium-term objectives including competitions and events you are intending to develop or provide.
- A copy of your organisation's constitution or governing rules if applicable.
- An outline of your organisation's governance and management structure.
- An annual calendar of Equestrian events your organisation is planning to run with the estimated number of participants at each event.
- A reference from your relevant Area Group or Area Discipline Committee.

What type of events are you considering providing?

- Dressage Endurance Eventing Show Jumping Other _____

What Area Discipline Group/s do you intend to join?

Why are you seeking status as a Member Organisation with Equestrian Sports NZ?

Please provide a summary statement of your Organisation's Purpose/Vision/Mission and short- and medium-term objectives.

Please provide a brief description of the facilities your organization owns that will be used in the provision of competition and/or training events:

Declaration:

Upon acceptance as a member organisation we hereby agree to be bound by and comply with ESNZ General & Veterinary Rules and Regulations and the ESNZ Constitutional Bylaw as a member of ESNZ.

Signature: _____

Date: _____