

RIDER # _____

(Office use only)



2020 "TRILOGY" MEMBERSHIP APPLICATION FORM

TRILOGY membership entitles the member to attend any or all of the six (6) Trilogy shows scheduled for 2020. This is an annual membership.

Price of membership: \$10.00 before May 1 (____)

\$20.00 after May 1 (____)

Rider Name: _____ 2020 OE #: _____

(Please attach copy)

Mailing Address: _____

Street

City

Postal code

Date of Birth: (dd/mm/yy): _____ Email : _____ Contact # _____

Rider Signature: _____

****IF UNDER 18 YEARS OF AGE, THE SIGNATURE OF PARENT/GUARDIAN IS REQUIRED****

*Parent/Guardian Name (Please Print): _____

*Signature of consenting Parent/Guardian: _____

TERMS AND CONDITIONS:

1. All Riders **must** be members of Ontario Equestrian (OE). Please attach a copy of your 2020 membership card!
2. Applications will not be accepted without proper signature(s).

Please send this form with payment: **via email/ettransfer to lanes.end@sympatico.ca**

Use trilogy as ettransfer security password OR

Via regular mail to: TRILOGY Registration: c/o Susan Laverty, 384 Cosh's Road, Bobcaygeon, ON K0M 1A0

***Please make cheques payable to TCTS* NOTE: NSF cheques will be charged a \$45.00 administration fee!**