



**EAST CHESHIRE COMBINED TRAINING GROUP**

**APPLICATION FOR MEMBERSHIP**

*(Please complete in block capitals)*

Name ..... (MR/MRS/MISS)

Address .....  
.....  
.....  
.....

Postcode .....

Telephone No .....

Mobile no (for text updates) .....

Email address .....

Age (If under 21) ..... *[Minimum age for membership is 17]*

I apply to be elected as a riding club member of the East Cheshire Combined Training Group and agree if elected to abide by the rules and to assist in any way whenever called upon to do so.

SIGNED.....DATE.....

It will help us to establish your grade within the club if you supply the following information:

Name of horse(s)	Age	Prize money won
.....	.....	.....
.....	.....	.....
.....	.....	.....

Prize money won by rider ..... (Approx.)

PLEASE INDICATE THE TYPE OF ACTIVITIES YOU ARE INTERESTED IN:-

Please return your completed form, along with a cheque (made payable to 'ECCTG') for the membership fee of £30, to the secretary:

ALISON UNWIN, 11 HAYFIELD CLOSE, TYTHERINGTON, MACCLESFIELD, CHESHIRE, SK10 2UW ([alpaulunwin@tiscali.co.uk](mailto:alpaulunwin@tiscali.co.uk))