

|  |
| --- |
| **Payment** |
| Competing Membership | $35.00ea |  |
| Non-Competing Membership | $10.00ea |  |
| Total |  |

|  |
| --- |
| **Payment Type** |
| Cheque | Amount: |
| Online Pmt (enclose copy) | Pmt Date: |
| Cash (do not mail) | Amount: |

|  |
| --- |
|   **CIEF Membership Application**  |
| **Main Applicant Information** |
| Name:  | DOB: D /M\_ /Y\_  |
| P.O. Box: | City: | Postcode: |
| Home#: | Cell#: | Other#: |
| Email address: |
| Nationality: |  |
| **Non-Competing Membership** |
| Name: | DOB: D /M\_ /Y\_  |
| P.O. Box: | City: | Postcode: |
| Home#: | Cell#: | Other#: |
| Email address: |
| Nationality: |

|  |
| --- |
| **Discipline Affiliation** |
|  Jumping |  Dressage |
|  Reining |  Gymkhana/FunEvents |
|   English |  Western |
|  Vaulting |  Trail/Pleasure |
|  ParaEquestrian |  Other:\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |
| --- | --- |
| **I can help with...** |  |
|  Show Management |  Sponsorship |
|  Fundraising |  Equine Welfare |  | **Training** |
|  Photography |  Show Food&Beverage |  | Affiliated Stable: |
|  Jump Crew |  Timer |  | Local Coach: |
|  Announcer |  Other  |  | Own Horse | Lease Horse | Neither |
| **Waiver of Liability** |
| I hereby agree to release, indemnify and hold harmless CIEF its instructors, officers, agents and volunteers from and against any and all loss, liability or damage arising from or because of, or in connection with participation in this membership and all related activities. I also hereby agree to release, indemnify and hold harmless the show management, show committee and members, officers, directors, agents, and volunteers from and against any and all loss, liability or damage arising from or because of, or in connection with participation in this membership or related activities. |
| Signature: | Print Name: | Date |

**Cayman Islands Equestrian Federation,** P.O. Box 818, Grand Cayman, Cayman Islands, KY1-1103. [www.ciefcay.com](http://www.ciefcay.com/)

Office Use Only: Received By: Completed: Issued Number: Date Card(s) Mailed: