



EQUINE GUELPH \*\* \$:

OEF YOUTH BURSARY \$:

SADDLE UP FOR SUCCESS \$:

*\*\*Personal contact information will be provided to Equine Guelph (EG) for all EG donors. Donations of \$20 or more to EG will receive a tax receipt from University of Guelph.*

### PRIVACY POLICY

The OEF recognizes the privacy of individuals with respect to their personal information and is committed to ensuring the privacy of its members. The information you provide to the OEF – such as your name, address, etc. – allows the OEF to inform you about events and activities and to notify you of issues, events or special offers which may be of interest to you. By becoming a member or by requesting information or registering for events or courses offered by the OEF, you are giving the OEF permission to contact you by way of the information you provide. Members may choose to customize their communications preferences by contacting OEF Member Services at [membership@horse.on.ca](mailto:membership@horse.on.ca) or 905-709-6545, ext. 14.

**IMPORTANT** – Mailing Agreement: I hereby give permission for the OEF to include my contact information in a list which may be used by mail distribution centres for the distribution of information judged by the OEF to be useful to members. The list will be handled in a controlled manner and will not be available for outside commercial purposes that are not affiliated with the OEF.

*Cross out this entire paragraph if you do not wish to give permission. NOTE that by doing so you will not receive a copy of WHOA!*

**IMPORTANT** – Publicity Agreement: I hereby give permission to the OEF to use my name or a photo of myself in conjunction with an OEF event being reported in the OEF newsletter, *WHOA!*, and in articles or reports of activities used on the radio or in newspapers, magazines, the OEF website, or other media which may be utilized by the OEF for publicity or communication purposes.

*Cross out this entire paragraph if you do not wish to give permission.*

### NEWSLETTER

Please indicate how you wish to receive your copy of **WHOA!**, the quarterly newsletter - *be sure to read the privacy statement above.*

INDIVIDUAL COPY

ONE COPY PER HOUSEHOLD

VIA MAIL

VIA EMAIL

### AFFILIATIONS

Please list all other equine clubs, organizations and associations in which you hold a membership

PONY CLUB MEMBER

Branch Name:

### PRIMARY DISCIPLINE (check only 1)

ENGLISH

WESTERN

DRIVING

SADDLE SEAT

VAULTING

### INDUSTRY PARTICIPATION (check all that apply)

BREEDER

RECREATIONAL RIDER

LESSON STABLE

STABLE HAND

TRAINER

COMPETITOR

BOARDING

PARENT

COACH/INSTRUCTOR

HORSE OWNER

GROOM

FARRIER

OFFICIAL

VETERINARIAN

VOLUNTEER

OTHER:

### SPECIAL INTEREST AREA(S) (check all that apply)

TRAIL/RECREATION

REINING

RODEO

SPEED EVENTS

WESTERN PERFORMANCE

HUNTER

JUMPER

EVENTING

DRESSAGE

COMPETITIVE TRAIL

TEAM PENNING

CUTTING

SADDLE SEAT

PLEASURE DRIVING

COMBINED DRIVING

THERAPEUTIC

ENDURANCE

VAULTING

FIELD HUNTING

OTHER:

### HORSE OWNERSHIP INFORMATION

RENT/LEASE

OWN

How MANY?

BOARD ELSEWHERE

OWN STABLE/FARM

### LIVESTOCK MEDICATIONS COURSE

Please indicate if you have completed a Livestock Medications Course

EQUINE

EXPIRY: \_\_\_\_\_

OTHER COMMODITY: \_\_\_\_\_

EXPIRY: \_\_\_\_\_

### METHOD OF PAYMENT

**NEW!** We now require your CSV#, which is the last three digits found on the **REVERSE** side of your credit card.

MEMBERSHIP

\$

CHEQUE

MONEY ORDER

VISA

MASTER CARD

HORSE MORTALITY

\$

RIDE ONTARIO

\$

CARD#:

SUBSCRIPTIONS

\$

CARDHOLDER:

DRESSAGE CANADA

\$

DONATIONS

\$

CSV#

EXPIRY:

**TOTAL FEES ENCLOSED**

\$

SIGNATURE:

*Please mail or fax completed form, along with payment to:*

**Ontario Equestrian Federation**  
9120 Leslie Street, Suite 203, Richmond Hill, Ontario, L4B 3J9  
Phone 905-709-6545 • Fax 905-709-1867 • Tollfree 1-877-441-7112  
Email [horse@horse.on.ca](mailto:horse@horse.on.ca) • Website [www.horse.on.ca](http://www.horse.on.ca)

OR Join/Renew online at [www.horse.on.ca](http://www.horse.on.ca)