

Practice Arena Steward Application Form

Please complete in BLOCK CAPITALS

Personal Details

Full Name

British Showjumping Membership Number*		
Mobile Number		
Email Address		
Email Address		
Address		
*You need to become an onlin free.	e member with British Showjumping to have a membership number. Please note joining as an online member is	
Qualifications and experience		
Relevant Training & Qualifications		
Please give details of any relevant training undertaken or any relevant qualifications/roles achieved along with dates obtained.		

Experience			
Please give us details of any relevant			
experience you feel			
makes you suitable for			
the role. Please detail			
any experience gained			
at show jumping			
shows.			
Motivation			
Discount of data the of			
Please give details of why you would like to			
become a Practice			
Arena Steward			
Confirmation			
I declare that the information given in this application is, to the best of my knowledge, complete and correct.			
I consent that the information contained within this form can be stored.			
Signed:		Date:	

 $\textit{Please return the form to your Regional Development Officer or by email to } \underline{\textit{sportteam@britishshowjumping.co.uk}}$