

CANADIAN PONY CLUB
CENTRAL ONTARIO REGION

TRANSFER OF MEMBERSHIP TO ANOTHER BRANCH

DATE _____

CURRENT BRANCH _____ REGION _____

NEW BRANCH _____ REGION _____

WHEN IS THIS TRANSFER TAKING PLACE? _____

LAST NAME _____ FIRST NAME _____

Mailing Address

STREET & NUMBER _____

CITY _____ PROVINCE _____ POSTAL CODE _____

HOME PHONE _____ BIRTH DATE _____
Include Area Code Day - Month - Year

HIGHEST PONY CLUB TEST LEVEL ACHIEVED (D1, C2, ETC) New members leave blank _____

DATE ACHIEVED _____ GENDER M or F Please circle one

EMAIL ADDRESS _____

Members who transfer from one Branch to another shall not be liable for a second payment of national or regional fees, but may be required to pay any fees set by their new Branches. The Branch from which the member is transferring shall not be required to refund branch fees already paid by such members but may choose to do so at its discretion.

Signature of Member

Signature of Parent/Guardian if member under 18

Signature of District Commissioner of Current Branch

Signature of District Commissioner of New Branch

The District Commissioner of both the current and the new branch should have a copy of this form and a copy should also be sent to the Regional Membership Secretary.