



CLASSIC CLUB MEMBERSHIP FORM

Your Name

Your home address

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Delivery address for any items you buy if different from above address

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Home Phone (landline please)

Mobile Phone

e-mail address

Your disciplines (tick as many as you want)

Dressage Showjumping Eventing Vaulting Endurance Hacking

Other (please specify)

Leave this area blank for us to fill in

Date received

Membership Number

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