



**CLAIM FORM – Equestrian Clubs**

**ROTARY CLUB OF BRIDGETOWN INC**  
 PO Box 259 Bridgetown WA 6255  
**BLACKWOOD MARATHON RELAY**

- Club must have Equestrian Activities as its main purpose.
- Club may make one claim only.
- Competitor’s name may appear on one claim form only
- Minimum claim \$100, requires two members. Maximum claim \$400, requires five or more members.
- Competitors must be current members of your club
- Claim must be made by President, Secretary or Treasurer.
- Claims must be lodged by end of November. Can be lodged by Post or Email.

**PLEASE PRINT - Clearly**

Club Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Position in club: \_\_\_\_\_

Phone \_\_\_\_\_ Email Address: \_\_\_\_\_

Club Address: \_\_\_\_\_  
 \_\_\_\_\_

Post Code \_\_\_\_\_

COMPETITOR NAME	TEAM NUMBER if known	Competed (Office use only)

I declare that:-  
 The Club named above is an official incorporated body.  
 Those named are current financial members of the Club.

Signed for Club \_\_\_\_\_ Date \_\_\_\_\_