



Ontario Equestrian Federation

2010 Associations Advisory Council Application Form

Thank you for your interest in the Associations Advisory Council. The Ontario Equestrian Federation is the umbrella organization committed to equine welfare and to providing leadership and support to the individuals, associations and industries in Ontario's horse community.

The Associations Advisory Council is an opportunity for volunteer horse associations to share information, resolve issues and receive education about concerns common to all breed and discipline organizations. Combined with these benefits is also the opportunity to apply for funding from the Ontario Ministry of Health Promotion via the Ontario Equestrian Federation to enhance and implement new programs within your organization.

Cost:

- \$275.00

Who is Eligible:

- Any Ontario equine or equestrian discipline or breed association of provincial scope in its aims and objectives or of national scope with designated regions within Ontario
- Applications are considered by the Associations Advisory Council at the meeting following receipt of same; recommendation to accept the application is made to the Board of Directors for final approval at the next meeting of the Board; notification of acceptance to membership will be forwarded to the President

Benefits Include:

- Eligibility to apply for grants from the OEF, for initiatives meeting provincial government criteria
- Complimentary text listing in the Ontario Horse Directory (distribution 25,000)
- Promotion of your Association at trade shows & events attended by the OEF
- Listing & Hot link on OEF website
- Referrals from the OEF Office
- Education of the rest of Ontario's horse lovers about your Association
- Credibility for your Association through membership in Ontario's only equine umbrella organization
- Ability to nominate your members for provincial awards and other forms of recognition
- Participation in significant decisions and issues affecting Ontario's horse industry



Ontario Equestrian Federation



2010 Associations Advisory Council Application

Association:
Appointed Representative: (Must be a current Adult OEF Member)
OEF Membership #:
Address:
City: Province: Postal Code:
Telephone (Res):
Telephone (Bus):
Fax #:
E-mail:
Web Site:

Membership: <i>January – December 31, 2010</i>	* All memberships are non-refundable
Associations Advisory Council Membership	2010 Membership Fee\$275.00
Description of Organization/Club:	* This description of your Association will be published on the OEF website and in the 2011 Directory.*
<i>Please provide a brief summary of your Association: Maximum 50 words</i>	

The following MUST be attached to your application for Membership:
<input type="radio"/> Association's Constitutions & By-Laws
<input type="radio"/> List of the current Officers of the Association
<input type="radio"/> Proof of CURRENT General Commercial Liability insurance - minimum \$2 million coverage
<input type="radio"/> Appointed Representative Individual Membership Application & fee for 2010 or proof of membership
<input type="radio"/> Payment - 2010 AAC membership fee - \$275.00

Method of Payment	**Cheques are to be made payable to the Ontario Equestrian Federation**			
<input type="radio"/> CHEQUE #	<input type="radio"/> MONEY ORDER	<input type="radio"/> VISA	<input type="radio"/> MASTER CARD	
CARD#:				
EXPIRY DATE:	CSV#: last three digits on REVERSE side of card			
CARDHOLDER NAME:				
SIGNATURE OF CARDHOLDER:				

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 • Website www.horse.on.ca

**OEF ASSOCIATION ADVISORY COUNCIL - 2010
MEMBER ASSOCIATION OFFICERS**

(as of December 31, 2009) PLEASE PRINT LEGIBLY

ASSOCIATION: _____ **ACRONYM** _____

WEBSITE _____

MEMBERSHIP:

NUMBER OF MEMBERS as at December 31, 2009 Adult: _____

Junior: _____ (Define) _____

TOTAL: _____

Male _____ Female _____

NUMBER OF MEMBERS WHO ARE OEF INDIVIDUAL MEMBERS _____

You may be required to provide proof of membership. To comply with the Privacy Act, a spreadsheet showing name, town, and membership number (if applicable) will be acceptable.

LAST ANNUAL MEETING HELD _____ NEXT AGM TO BE HELD _____

COUNCIL REP

Must be a
current OEF
Adult Member

Name _____

OEF# _____

Mailing Address _____

City _____ Postal Code _____

Phone - R () _____ Phone - B () _____

Fax () _____ Email _____

PRESIDENT

Name _____

Mailing Address _____

City _____ Postal Code _____

Phone - R () _____ Phone - B () _____

Fax () _____ Email _____

VICE-PRESIDENT

Name _____

Mailing Address _____

City _____ Postal Code _____

Phone - R () _____ Phone - B () _____

Fax () _____ Email _____

TREASURER

Name _____

Mailing Address _____

City _____ Postal Code _____

Phone - R () _____ Phone - B () _____

Fax () _____ Email _____

SECRETARY

Name _____
Mailing Address _____
City _____ Postal Code _____
Phone - R () _____ Phone - B () _____
Fax () _____ Email _____

COMMUNICATIONS

(Newsletter)

Name _____
Mailing Address _____
City _____ Postal Code _____
Phone - R () _____ Phone - B () _____
Fax () _____ Email _____

COMMUNICATIONS

(Website)

Name _____
Mailing Address _____
City _____ Postal Code _____
Phone - R () _____ Phone - B () _____
Fax () _____ Email _____

GRANT

**(In charge of
Application process)**

Name _____
Mailing Address _____
City _____ Postal Code _____
Phone - R () _____ Phone - B () _____
Fax () _____ Email _____

Please write a 3- 4 sentence description to outline what your association's goals, aims etc. This description will appear in the 2011 Horse Directory and will be included on the Associations' page of the OEF website.

Please mail or fax completed form to:

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