Australian Endurance Riders Association Inc

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From: **Date:**

Pages: 1

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Request for Certificate of Currency

Name of Incorporated Club making request	
Name of person completing this request	
Your position held at club (i.e. member/secretary)	
Your contact details	
Phone number :	**Email :**
Name of Ride/Event	
Name of Division the ride/event is affiliated	
Name of Property Owner to be noted	
Date of Ride/ Event / Activity	
Date required by	

Forward Certificate of Currency to :

Name	
Postal Address	
Facsimile Number	
Email Address	