

2023 MEMBER CLUB APPLICATION

(Effective from January 1st - December 31st, 2023)

Club Fee: \$50 payable to Equestrian NS. Check your on-line club account for referral credits and apply prior to making payment. Please enter referral credit amount:

It is hereby understood that any club, group, etc., completing the attached application, agrees to support abide by the Equestrian NS Aims and Objectives.

•	od that any club, group, etc., co ian NS Aims and Objectives.	mpleting the attached application, agrees to support and
ALL SECTIONS OF THI	E ATTACHED MUST BE COMPLE	TED BEFORE THE APPLICATION CAN BE APPROVED.
	oresented on the Equestrian NS or proposals, please contact Kim a	Board by the Director of Clubs, Kim Fortin. If you have any t kafortin@eastlink.ca
(Please type or print)		
1. NAME OF ASSOCIA		
		be posted on the Equestrian NS website, handouts, events calendar, etc.
	E:	
ADDRESS		
POSTAL CODE_		IL:
TELEPHONE:	(Primary)	(Secondary)
I consent to	having my name and contact informat	ion displayed
3. SECRETARY'S NA	AME:	
ADDRESS		
POSTAL CODE_	E-MA	AIL:
TELEPHONE:	(Primary)	(Secondary)
4. EQUESTRIAN NS I	DIRECTOR: (MUST BE A 2023 EQ	UESTRIAN NS MEMBER)
a) This person will recei	ive all correspondence from the Equest	rian Nova Scotia office directed to your Club/Association.
b) The individual you as member of your Club/A		strian Nova Scotia member and the individual must also be a paid up
NAME:		
POSTAL CODE	E-N	MAIL:
TELEPHONE:	(Primary)	(Secondary)
I consent to	having my name and contact informa	tion displayed
and/or president. Please		are sent via e-newsletters to the email addresses of the club director should be receiving emails in addition to the Club Director (i.e.,
Name:	I	Position:

PLEASE COMPLETE THE REVERSE SIDE OF THIS FORM

OFFICE USE ONLY	RECEIVED: Constitution or Aims/Objectives/Mbr Guidelines:		
Director's Member#	Payment :	Payment Type:	
Club Insurance:	Insurance Expiry Date:	Date Sent for Approval:	
DATE APPROVED	APPROVED BY	Package Sent:	

6. Number of Members in Club Last Year:				
7. Club Website:				
8. Club Description (brief for website and club promotion):				
9. What is the date of your Annual General Meeting (AGM) or	approximate (i.	e., usually	y 3 rd week of Novem	ber)?
10. Is your group registered under the Societies Act in Nova Scotia	n? YES	NO	_(Please check one)	
11. Does your club carry Commercial General Liability Insurance?	YES_	NO	_(Please check one)	
A current copy of the policy must be submitted with this apple ensure your renewed certificate is forwarded to Equestrian NS w			pires during the 202.	3 calendar year, please
Please be reminded that as an member/associate club of commercial general liability insurance to cover all of your act include Equestrian NS as an "additional insured". You must have this coverage. If you have any questions about this requirement will know how to fulfill this requirement and will mo NS on your behalf.	ivities, with a n ast provide Equairement, you s	ninimum o estrian Na should con	coverage limit of \$2, S with a Certificate ntact your insurance	000,000. The policy is to of Insurance to prove you provider. Your insurance
12. Please attach a copy of your Club's By-laws. If this is not av their Membership Guidelines in the space below.	ailable, please p	provide us	with your Club's Ai	ms and Objectives and
AIMS AND OBJECTIVES: (Attach additional sheets if ne	ecessary)			
13.To help us complete our government reporting which will please provide us with the following information for your club conce a year by emailing nsefservices@sportnovascotia.ca .				
 Coaching Clinics - date, location, number of participants Officials Clinics - date, location, number of participants Athlete Development Clinics - date, location, number of part Athletes competing at Regional, National, International Comp Name, Location, Date, and Athlete Results Athletes recognized for potential competitive recognition - lo Award Recognition - Name of Award Recipient, type of award Award, Coaching Award) Officials from your club who judge, steward, or course design 	petitions/Champ ong or short list rd, date received	ed for Nat d (i.e. Gov	tional teams vernor's Award, Volu	unteer Recognition
I (we) the undersigned have read and understand the content of Equestrian NS and confirm that the information given is true of		n form, ag	gree to abide by the A	Aims and Objectives of
Signed	Position	n		Date
Signed	Position	ı		
Equestrian NS - 5516 Spring Ga Phone 902-425-5450 Fax S			Halifax, NS, B3J	

CLUB SURVEY

As a valuable member, we would love to hear about opportunities, programs, and events your club/ facility offers throughout the year. With this information, we want to assist you with promoting and supporting these programs and initiatives!

Please take some time to help us gather all the amazing opportunities you have to offer!

	you require your members/clients to be an Equestrian NS member? Yes
-	No
-	Sometimes (program specific reason)
2.) Do	es your club host Scotia Series sanctioned shows?
	Yes
	No
	No, but I would like more information on steps to host a Scotia Series sanctioned show
3.) Do	es your club/facility have any strategies in place to grow/retain/maintain membership?
	Yes
	No
	s", please specify (i.e., member-specific benefits, member discounts, member polition programs, etc.).
	s your club/facility provided any clinics, programs, or events that attracted non- club pers/clients?
	Yes
	No
	s", please provide us with details such as date and number of participants. Examples of
non-n	nember programs might be Learn to Ride, Rookie Riders, riding clinics, and member al program.
non-n	

5.) Does your club/facility provide program, event, or clinic opportunities specifically for women and girls? We are asking this question to identify any programs and/or services that are promoting Equestrian sport directly to women and girls.
Yes
No
If "Yes", please provide us with details such as date and number of participants (i.e., women/girl riding nights).
6.) Does your club/facility provide program, event, or clinic opportunities for Indigenous Communities? We are asking this question to identify any programs and/or services that are promoting Equestrian sport directly to Indigenous Communities. YesNo
If "Yes", please provide us with details such as date, number of participants, and type/name of the initiative.
7.) Does your club/facility provide parasport or any type of therapeutic riding programs, events, or clinics for your members or clients? Yes No If "Yes", please provide us with details such as date, number of participants, and type/name
of the initiative.
8.) Does your club/facility provide initiatives or programs that are specific for engaging Black Nova Scotian/African Nova Scotian communities?
Yes
No
If "Yes", please provide us with details such as date, number of participants, and type/name of the initiative (i.e., diversity/inclusion training for coaches, outreach riding program to a Black Nova Scotian/African Nova Scotian communities in your area).

9.) Does your club/facility provide program, event, or clinic opportunities for newcomers to Canada
Yes
No
If "Yes", please provide us with details such as date, number of participants, and type/name of the initiative.
10.) Does your club/facility offer programs, events, or clinics to underrepresented groups? Examples of underrepresented groups are Low Socio-Economic, 2SLGBTQI+, Youth at Risk, etc. If yes, please provide us with details such as date, participant numbers, and initiative name (i.e., Kidsport, Pride Week events, collaboration with local school/recreation departments).
11.) Have any athletes that train at your club/facility competed in any Eastern, National, and/or International competitions? Yes
No
If "Yes", please list the name of the athlete(s), competition name, competition date, and placings.
12.) Are you aware that Equestrian NS hosts an annual Coach Symposium?
12.) Are you aware that Equestrian NS nosts an annual Coach Symposium? Yes
No
13.) Please list competitions/events that your club/facility has put on in the past year (if none, put N/A).

Thank you for your time and efforts in completing this section of the application. Your input is valuable to us!

Club Key Areas and Actions Self-Assessment Survey

In an effort to assist Equestrian NS Member Clubs in areas of effective governance/management, please complete this self-assessment to the best of your knowledge. If you wish to complete at a future date (perhaps during your next Board meeting), please submit your results to nsef@sportnovascotia.ca or fax at 902-425-5606

Club Name: Survey Co	ontact:
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Key area	Actions	Y	our Rat	ing	
Member in good standing	Annual Renewal	• Poor	Good	Excellent	N/A
with Registry of Joint Stocks	 Financial information filed 	• Poor	Good	Excellent	N/A
	 List of new Board of Directors 	• Poor	Good	Excellent	N/A
	 Submission/approval of most recent by-laws 	• Poor	Good	Excellent	N/A
Member in good standing	 Annual fee has been paid 	• Poor	Good	Excellent	N/A
with Equestrian NS	 Director elected/chosen 	• Poor	Good	Excellent	N/A
	 Proof of Insurance Submitted 	• Poor	Good	Excellent	N/A
	 Aims and Objectives Submitted 	• Poor	Good	Excellent	N/A
Financial budgeting and tracking	 Annual budget adopted/approved by Board and/or membership 	• Poor	Good	Excellent	N/A
	 Monthly financial reports that include: last year's actuals, this year's budget, current year's actuals to date, previous year's actuals to date (for same time period) 	• Poor	Good	Excellent	N/A
Planning/priorities	 All Board members are aware of organization's 	• Poor	Good	Excellent	N/A
(minimum next 12 months –	priorities	_			
based on some evaluation	System is in place to track and monitor the	• Poor	Good	Excellent	N/A
of last year's success and	successful implementation of				
input from key stakeholders)	committees/workgroups				
Policies – organization has	All policies/practices have been reviewed	Poor	Good	Excellent	N/A
effective policies and	/updated within the past 3 years	1 001	Good	EXCENCITE	14,71
procedures for conducting	Board/Committee members are aware of and	• Poor	Good	Excellent	N/A
its business and operations	follow appropriate policies and procedures in				,
	conducting the organizations business				
	 Policy and procedures documents are available in 	• Poor	Good	Excellent	N/A
	one location (manual or electronic folder)				
Insurance protection	 Annual Policy Renewals re: Directors liability, 	• Poor	Good	Excellent	N/A
	event insurance, members injury etc.				
Board functioning – Board members are clear around	 Roles of Board members and staff are clear and communicated 	• Poor	Good	Excellent	N/A
roles/responsibilities/expect	 Committees roles are explained 	• Poor	Good	Excellent	N/A
ations	Expectations of Board members are discussed	• Poor	Good	Excellent	N/A
Board meeting management	Agendas and any pre meeting materials are sent	• Poor	Good	Excellent	
	out in advance				•
	Board members are clear on process to submit	• Poor	Good	Excellent	N/A
	agenda items				-
	 Minutes/records of actions and decisions are 	• Poor	Good	Excellent	N/A
	kept and sent out within 2 weeks after meeting				
	 Process in place for tracking and reporting on 				
	actions from meetings	• Poor	Good	Excellent	N/A
	 Meeting schedule is developed well in advance of 				
	meetings	• Poor	Good	Excellent	N/A

EQUESTRIAN NS CLUB MEMBERSHIP BENEFITS AND SERVICES

- Assistance with club governance (by-laws, structure, etc)
- Club listing on the Equestrian NS Website;
- Promotion of your clubs events, competitions, clinics on our website;
- Club Promotion at Trade Shows where Equestrian NS participates which may include: Milk Sport Fair, Horse Fairs;
- Free Club Certificates for Show Circuits, Volunteers, etc.
- Administrative Support (cost recovery) Press Release Service, Desktop Publishing, and low rates for Printing/Copying;
- Fundraising Opportunities SportSweep and Sport Split 50/50 Programs;
- Funding Support for Community Sport Associations through NS Amateur Sport Fund (funding opportunities may help with equipment purchases, developing new sport participation programs, EDI projects, etc.). Equestrian NS is able to assist with these applications before they are submitted for endorsement.
- Sport Nova Scotia Travel Program (vehicle rental, accommodations);
- Equestrian NS Referral Program Member Clubs can receive discounts on their membership when they refer new members who join Equestrian NS.
 Some limitations do apply.

For more information, please contact the Equestrian NS Office: 902-425-5450 ext. 342 or nsefservices@sportnovascotia.ca

If your Club Members are interested, the Equestrian NS Membership Application for individuals is available on the Equestrian NS Website. If you would like information on the benefits of an Individual Equestrian NS Membership for yourself or your members, please go to the Membership section of the Website or contact the Equestrian NS Office.

www.horsenovascotia.ca



Committee Interest Form

Equestrian NS is a vibrant organization thanks to its many volunteers who dedicate their time and expertise on one or more of its many committees. If you are interested in volunteering your time on one or more of the Equestrian NS Committees listed below, please complete this Interest Form and submit to the Equestrian NS Office.

First Name	Last Name			
Address	City/Province	Postal Code		
Daytime Phone	Primary Email	Membership #		
 □ By-Law/Policy Committee □ Marketing/Sponsorship Commit □ Recreation Committee □ Industry Committee □ Competitions Committee □ Multi-Discipline Coach Advisory □ Bursary Selection Committee □ Para-Equestrian Committee □ Nomination Committee □ Performance Pathway Program □ Other Equestrian NS Ad-hoc Committee 	Committee nmittees, as necessary	mittee in which you are interested.		
Please give us some information on w	ny you would like to volunteer on t	ne above committee(s):		
Please check all of the following s Topic Knowledge Long-Term Athlete Development Industry Knowledge Fundraising Board Training Para-Equestrian Team-Building	kills/experience you feel you ca	n provide to the committee(s): Computer Programs Legal Event/Meeting Management Policy Development Risk Management Officials		