



BHRC LICENCE RENEWAL FORM



(All questions must be answered in full)

Title (Mr, Mrs, Miss, Dr, etc): _____

Date of Birth: _____

Surname: _____

Maiden Name (if applicable): _____

Forename(s): _____

BHRC Licence No: _____

Year Last Renewed: _____

2010 Application (please tick appropriate category):

LICENCE FEES								
1st March to 30th April								
Annual Registration (compulsory)	£10.00	✓	Owner	£30.00		Driver Class 'C'	£19.80	
			Calendar Subscription (compulsory)	£15.00	✓	Trainer Permit	£13.20	
			Licence to Train	£39.60		Driver Class 'A'	£60.00	
			Public Trainer	£79.20		Provisional Driver	£13.20	
					Colours Registration	£2.00		

Address: _____

Postcode: _____

Contact No: _____ Email: _____

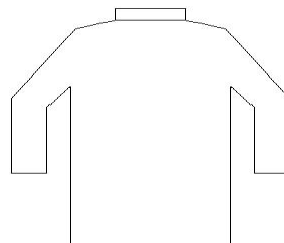
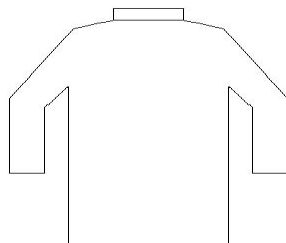
Stable Address (if different from above): _____

Postcode: _____

Please list all horses presently in your ownership or care
(complete on separate sheet if necessary)

HORSE	TRAINER

COLOURS REGISTRATION





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During the last five years have you had a criminal conviction against you or served a term of imprisonment, or have you ever been undischarged bankrupt YES / NO (delete as applicable)

If yes please give details: _____

Data Protection Act -

The BHRC may from time to time like to share telephone information with like minded individuals or organisations, e.g. A new supporter may wish to be put in touch with someone in their area for advice. If you would prefer us NOT to disclose your particulars to anyone else, do please let us know by ticking this box

I apply to have my existing licence(s) renewed and I declare that I know of no reason for the BHRC to refuse to issue such a licence.

In applying for this licence I agree to abide by the Rules of the BHRC

Print Name: _____

Signature: _____ Date: _____

Cheque / Postal Order enclosed payable to BHRC

Amount: £ _____ . _____ p

Signature:

TO PAY BY DEBIT/CREDIT CARD PLEASE COMPLETE FORM BELOW

Credit / Debit Cards We Accept:

(Payments under £5 subject to a 3% surcharge - Payments over £5 subject to a 1.5% surcharge - Effective from 1st January 2010)

Name (as printed on Debit/Credit card): _____

House Name or Number (registered as Billing Address for Debit/Credit card): _____

Address: _____

Postcode: _____

Email Address (to receive confirmation receipt): _____
(If not provided receipt will be posted to above address)

I authorise you to debit my card No: _____ Amount: £ _____ . _____ p Security Code: _____
(Last 3 digits on reverse of card)

Start Date / Issue Date: _____ Expiry Date: _____ Issue Number: _____ Signature: _____