



MYPONY/CLUB PASSWORD APPLICATION FORM – FOR THE YEAR OF _____

Affiliated Pony Club Name: _____ **Zone** _____

PRESIDENT

Full Name: _____

Address: _____ Postcode: _____

Signature: _____ Date: _____

I hereby authorise and nominate the following person to act as the Trusted Club Official and be issued with secure password access to the MyPonyClub facility and thereby gain access to personal information of members of this Pony Club.

TRUSTED MYCLUB OFFICIAL

Full Name: _____

Address: _____ Postcode: _____

Phone: (H) _____ (W) _____ (M) _____

Email: _____

Full Name: _____

Address: _____ Postcode: _____

Phone: (H) _____ (W) _____ (M) _____

Email: _____

Full Name: _____

Address: _____ Postcode: _____

Phone: (H) _____ (W) _____ (M) _____

Email: _____

Full Name: _____

Address: _____ Postcode: _____

Phone: (H) _____ (W) _____ (M) _____

Email: _____

Full Name: _____

Address: _____ Postcode: _____

Phone: (H) _____ (W) _____ (M) _____

Email: _____

Declaration: -



The Pony Club Association of N.S.W.

Phone: (02) 42298977 Email: admin@pcansw.org.au Correspondence to: PO
Box 2085 Wollongong NSW 2500 Australia

I hereby declare that I will use the MyPonyClub facility for the purpose to which it is intended and **will not divulge my access logon or password to any other individual or entity**. I also declare that any information that I have access to using this facility will remain confidential and not be used for any purposes outside of the management of the membership database and club functions. I agree not to make any information available to any outside party or gain any commercial or financial benefit from the information that I have access to. I agree to be bound by the intention and requirement of the Privacy Act and only use the information at my disposal for the intention that it was provided.

Clubs and Zones may have five (5) authorised access holders and forms must be submitted for each access holder every year prior to the 31st January.

I have read and understand the above declaration and accept its requirements and obligations and accept the position as Trusted

MyPonyClub Official with: _____ Pony Club.

Signature: _____ Date: _____

MyPonyClub Official with: _____ Pony Club.

Signature: _____ Date: _____

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Signature: _____ Date: _____

MyPonyClub Official with: _____ Pony Club.

Signature: _____ Date: _____

MyPonyClub Official with: _____ Pony Club.

Signature: _____ Date: _____

MyPonyClub Official with: _____ Pony Club.

Signature: _____ Date: _____

Received: _____ Login: _____ Password: _____