

SASJ National Steward Application



Applicant Name:	
This form is to be sent directly to the Provincial Jumping Committee for verification with your attached logbooks or summary sheet/s of practical Record of Experience stewarding.	
Successful applications are forwarded by the Provincial Committee to the National Office to be added to national database.	
SASJ Membership Number:	
SAEF Membership Number:	

Practical Experience	Venue and Date of Event		
Officiated at 6 x SASJ Events per year (min) as a Novice Steward in the past year	1	4	
	Date:	Date:	
	2	5	
Date:	Date:		
3	6		
Date:	Date:		
Assessed by 3 x FEI L2 (or higher) Chief Stewards <i>(with recommendations for promotion)</i>	CS 1:	Event:	
		Date:	
	CS 2:	Event:	
		Date:	
	CS 3:	Event:	
		Date:	
National Exam	Date:		
	Venue:		
	Result:		
Annual Officials Seminar Attendance	Date:	Date:	
	Location:	Location:	

Please provide the following details to SA Showjumping for your accreditation:

Name:		Date of Birth:	
Address:			
Suburb:			
Province:		Post Code:	
Tel:		Mobile:	
E-Mail:			
Emergency Contact:		Mobile:	
Medical Aid:	Yes	No	Name + Number:

SIGNED:

DATE: