



The Pony Club Association of N.S.W.

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CHAMPIONSHIP NOMINATION FORM

RIDER PARTICULARS

NAME IN FULL

ADDRESS P/C

PHONE MOBILE

EMAIL DATE OF BIRTH

AGE GROUP CLUB ZONE

THIS IS A NOMINATION FOR STATE (Name of event)

TO BE HELD AT ONVECHILE REGO NO.....

HORSE PARTICULARS

REGISTERED NAME or STABLE NAME (if not registered)

ATTENDEE PARTICULARS

PLEASE LIST THE DETAILS OF ALL PEOPLE (ADULTS/CHILDREN) ACCOMPANYING THE NOMINATED RIDER BELOW.

NAME	RELATIONSHIP TO RIDER	CLUB/ZONE	MOBILE PHONE CONTACT AT EVENT	DATES YOU WILL BE AT THE GROUNDS	ARE YOU CAMPING ON THE GROUNDS? IF SO WHAT DATES?
1.					
2.					
3.					
4.					
5.					

I HAVE READ THE RULES AND REGULATIONS OF THE ABOVE CHAMPIONSHIP AND ON BEHALF OF

MYSELF/ MY SON/ DAUGHTER (circle which is applicable) AGREE TO ABIDE BY THEM AND I CONFIRM THAT THE NOMINATED MOUNT IS OWNED/LEASED (circle which is applicable) BYA MEMBER OF PONY CLUB.

NOTE: I understand that the competitor must attend the presentation parade on the final day unless he/she have been given permission, by the advisory committee, to leave early.

SIGNED PARENT/GUARDIAN (IF RIDER UNDER 18 YEARS OF AGE)

SIGNED RIDER 18 YEARS & OVER

I HEREBY VERIFY THAT THE ABOVE RIDER IS A FINANCIAL MEMBER

OF THE PONY CLUB AND HAS ATTENDED AT LEAST THREE PONY CLUB INSTRUCTION DAYS IN THE PRECEDING 12 MONTHS.

SIGNED CLUB SECRETARY

I HEREBY VERIFY THAT THE ABOVE RIDER IN MY OPINION IS OF A SUITABLE STANDARD TO COMPETE IN THE ABOVE CHAMPIONSHIPS.

SIGNED CLUB SENIOR INSTRUCTOR

I HEREBY VERIFY THAT THE ABOVE RIDER HAS SUBMITTED PERFORMANCE CARDS TO ME AND IN MY OPINION IS OF A SUITABLE STANDARD TO COMPETE IN THE ABOVE CHAMPIONSHIPS.

SIGNED ZONE CHIEF INSTRUCTOR (OR DEPUTY)

THIS FORM IS TO BE FORWARDED TO THE PCA OFFICE TOGETHER WITH HORSE IDENTIFICATION PAPER.

The financial support of the NSW Department of Tourism, Sport & Recreation is acknowledged