



The Pony Club Association of N.S.W.

Office 7, 25 Victoria Street Wollongong NSW 2500

Phone: (02) 42298977 Fax: (02) 42298966 Email: admin@pcansw.org.au

Correspondence to: PO Box 2085 Wollongong NSW 2500

TWENTY SECOND ANNUAL STATE CAMP

Sunday 4th to Friday 9th January 2015

Sydney International Equestrian Centre, Horsley Park

The Camp is open to Pony Club members who:

- 1) Are financial members for the 2015 year with all paperwork (Affiliation papers, Risk Warning) received at the state office before the 1st November 2014.
- 2) Will be aged 15 to 24 years inclusive on the first day; (Excluding Mounted Games – riders aged 14 or 15 years as at the 1st of January.)
- 3) Have passed their "C" certificate;
- 4) Are of State Championship standard in their chosen discipline;
- 5) Will be mounted on a suitable horse to maximise benefit from top instructors;
- 6) Are recommended by their Club and have satisfactory attendance at Pony Club instructional rally days (must have attended at least 3 rally days in the preceding 12 months, copy of attendance card to be included);
- 7) Are recommended by their Zone Chief Instructor as a worthy Pony Club member of sufficient standard;
- 8) Horse microchipped and vaccinated against Hendra Virus. Please attach a copy of a current Hendra Vaccination Certificate with your application.

GENERAL INFORMATION

- Camp members will be accommodated onsite at the Sydney International Equestrian Centre, Wallgrove Road Horsley Park. All members will be accommodated in twin share rooms and members of the opposite gender will not be permitted in these rooms. Any persons found breaking this rule will be sent home. Members must provide their own sheets, blankets, towels, pillows and pillowcases. All meals, morning and afternoon teas will be provided.
- Horses will be accommodated and riding instruction will take place at SIEC. Covered stabling and a covered arena are available in addition to extensive outdoor areas, cross country course etc. Members are to provide their horses' feed as to not disrupt feeding patterns. Stable bedding is provided. There will be lectures on some evenings.
- Members who are proficient in more than one discipline may apply for more than one discipline and/or on a different horse ON SEPARATE FORMS but must state order of preference, as only one discipline can be allowed.
- ANY RIDER WHO ATTENDS THE CAMP ON A HORSE OTHER THAN HORSE ACCEPTED WILL NOT BE PERMITTED TO PARTICIPATE IN INSTRUCTION.
- ONLY USE THE FORMS PROVIDED IN YOUR APPLICATION. Note – places at Camp are eagerly sought and it is essential that the form should contain full details and be completed with care. Selection is based upon the information in the form.

FEES

\$150.00 per member (including GST) payable upon notification of acceptance. Please do not forward with application. This is a nominal fee. The Association meets all other expenses. Successful applicants who have not paid their \$150 entry fee to the Association by the due date (**Friday 5th December 2014**) will forfeit their place in camp and the reserve rider will be notified immediately.

RULES

1. All Pony Club rules apply.
2. Camp members are to be in Club uniform at all times when under instruction (approved helmet ASA NZ3838, ASTM F1163 or EN1384, approved boots with or without gaiters, fawn Jodhpur and Club, Zone or State polo/ long sleeved shirts with ties). At all other times members are to be tidily dressed.
3. Members **will not** be permitted to drink alcohol or smoke during the camp. Mobile phones cause a major problem at camp therefore the use of mobile phones will be restricted to 5.30pm-6.00pm each evening. It would be preferred if mobile phones were not brought to camp at all.
4. Members will not be permitted to drive cars during the Camp. Members will not be permitted to leave the Camp unless permission is granted.

5. Members are expected to strive hard during instruction and lectures, to enjoy the fellowship with other members and to conduct themselves appropriately at all times.
6. Camp members are responsible for the care of their horses and their stables.
7. All members are subject to the control of camp officials whose decisions shall be final.
8. Camp members are expected to arrive at the Sydney International Equestrian Centre between 2pm and 6pm on Sunday 4th January. Instruction will commence on Monday morning and finish on Thursday afternoon. Camp shall break after breakfast on Friday 9th January.
9. Parents are not permitted to attend Camp at all until Friday morning.
10. The only jewellery permitted to be worn by riders when mounted are studs in the ears and wristwatches (medical alerts are permitted). Rings, if worn, must be taped.
11. Any breach of the above rules may lead to immediate expulsion from the Camp.
12. **Riders must arrange to be financial members of the Association for the 2015 year with their club when submitting camp applications, before the 1st November 2014.** You must ensure that you have paid your club and completed a risk warning and that your club has sent in your membership and risk warning to the office. Updating a rider on MyClub does not automatically make a rider financial with the Association as no risk warning or payment would have been received in the office. Please note that these affiliations should be sent via an affiliation form rather than MyClub with a note stating that these riders have nominated for the State Camp.
13. **All horses attending State Camp must be vaccinated against Hendra Virus. Please attach a copy of your Hendra Vaccination Certificate to this application. The association will be checking microchip numbers to confirm vaccination's at camp.**
14. The Association reserves the right to accept or reject any application and no explanation will be given.

Applications close at Pony Club Association Office at 5pm 1st November 2014.

Please forward applications to:

**The Pony Club Association of NSW
PO Box 2085
WOLLONGONG NSW 2500**

Please complete the following forms and forward to the State Office:

1. **2015 State Camp Application Form**
2. **Horse Identification Form** - To include all appropriate signatures.
3. **Hendra Vaccination Certificate** – An example of the Hendra Vaccination Certificate is provided in this document, a current certificate must be provided.
4. **State Camp Merchandise Order Form**
5. **Performances of nominated horse/rider combination Form** - Members may apply for more than one discipline and/or on a different horse ON SEPARATE FORMS but must state order of preference, as only one discipline can be allowed.
6. **Verification of details Form** - To include all appropriate signatures.
7. **Riders must arrange to be financial members of the Association for the 2015 year.** You must ensure that you have paid your club and completed a risk warning and that your club has sent in your membership and risk warning to the office.

2015 STATE CAMP APPLICATION FORM

FULL NAME: _____

POSTAL ADDRESS: _____

PHONE: Please provide all phone numbers so that we can contact you at any time:

Home: _____ Work: _____

Email: _____ Mobile: _____

Parents Work: _____ Fax: _____

AGE: _____ DATE OF BIRTH: _____

OCCUPATION (if applicable): _____

PONY CLUB: _____ ZONE: _____

NUMBER OF YEARS AS A PONY CLUB MEMBER: _____

NUMBER OF RALLY DAYS ATTENDED IN THE LAST 12 MONTHS: _____

ARE YOU A FINANCIAL MEMBER FOR THE 2015 YEAR WITH ALL PAPERWORK SUBMITTED TO YOUR CLUB AND THE ASSOCIATION? YES ☐ NO ☐

PROFICIENCY CERTIFICATES HELD: _____

(All riders must hold a C Certificate. Please attach a photocopy to this application.)

OTHER CERTIFICATES HELD: _____

HORSE NOMINATED: _____

DISCIPLINE: (circle one) Dressage Showjumping Eventing Mounted Games Pilot Advanced Horsemanship
(Applications may be made for more than one discipline and/or on more than one horse. However, a separate performance form must be completed for each horse and/or discipline.)

Please indicate preference if more than one discipline is applied for.

1st preference= 2nd preference= 3rd preference= 4th preference= 5th preference=

DO YOU HAVE ANY MEDICAL CONDITIONS OR ALLERGIES THAT WE SHOULD KNOW ABOUT? (please circle) YES / NO

If yes, please provide details _____

WILL YOU NEED TO TAKE ANY MEDICATION WHILE AT CAMP? YES / NO (please circle) If yes, please give details



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HORSE IDENTIFICATION FORM

RIDERS NAME: _____

PHONE: _____ DATE OF BIRTH: _____

ZONE: _____ CLUB: _____

HORSE'S FULL NAME: _____

DATE OF HENDRA VACCINATION: _____ (COPY OF CERTIFICATE TO BE ENCLOSED)

MICROCHIP NUMBER: _____

PROPERTY IDENTIFICATION CODE (PIC): _____

OWNERS NAME: _____ LEASED: YES/NO

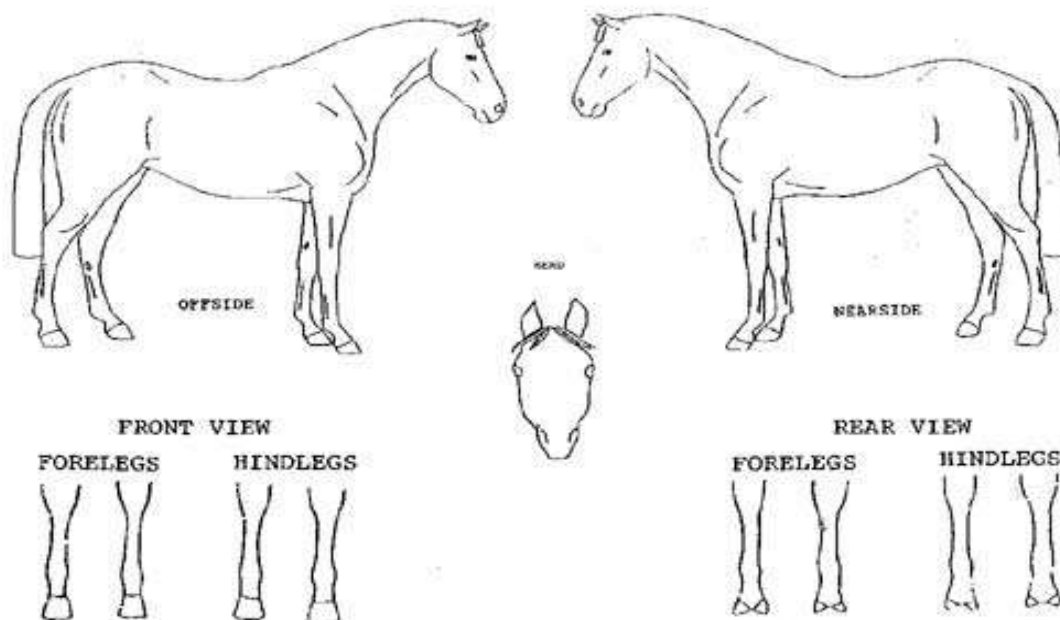
If not owned by rider or another member of riders club please provide a copy of the lease agreement

COLOUR: _____ HEIGHT: _____

SEX: _____ AGE: _____ BREED: _____

MARKINGS: _____

BRANDS: _____



I certify this to be the horse entered by the above riding member for the 2015 State Camp.

Signed: _____ (Zone Chief Instructor) Date: _____

Signed: _____ (rider if 18 years or over) Date: _____

Signed: _____ (parent/guardian if rider under 18) Date: _____

Hendra Vaccination Certificate

has been vaccinated with Equivac HeV ®

Age: 10 years

Address: 108 Hume St, West Ryde

Suburb: West Ryde

State: NSW

Postcode: 2114

Date Vaccinated: 10/10/2012

Batch Number: 013470031

Vaccinated by: Dr Peter Smith



Equivac® HeV
The only way to vaccinate against Hendra

zoetis



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MERCHANDISE ORDER FORM

In order to ensure merchandise is ready in time for Camp, please fill out the order form below to indicate what size you would prefer if selected to attend. This shirt is only provided if you are selected. Payment will be requested upon selection.

POLO SHIRTS

Description

NSW PCA State polo shirt with names of all camp members for each discipline printed on the back.

Colour

Sky Blue with navy trim

POLO SHIRT (please tick size)

<input type="checkbox"/>	Childs Size 12	Quantity _____	@ \$35 each	Total = \$ _____
<input type="checkbox"/>	Childs Size 14	Quantity _____	@ \$35 each	Total = \$ _____
<input type="checkbox"/>	Childs Size 16	Quantity _____	@ \$35 each	Total = \$ _____
<input type="checkbox"/>	Adult Ladies 10	Quantity _____	@ \$35 each	Total = \$ _____
<input type="checkbox"/>	Adult Ladies 12	Quantity _____	@ \$35 each	Total = \$ _____
<input type="checkbox"/>	Adult Ladies 14	Quantity _____	@ \$35 each	Total = \$ _____
<input type="checkbox"/>	Adult Ladies 16	Quantity _____	@ \$35 each	Total = \$ _____
<input type="checkbox"/>	Adult Ladies 18	Quantity _____	@ \$35 each	Total = \$ _____
<input type="checkbox"/>	Men's Small	Quantity _____	@ \$35 each	Total = \$ _____
<input type="checkbox"/>	Men's Medium	Quantity _____	@ \$35 each	Total = \$ _____
<input type="checkbox"/>	Men's Large	Quantity _____	@ \$35 each	Total = \$ _____

(15 Positions available at Camp)

FULL NAME OF RIDER: _____

FULL NAME OF HORSE: _____

AGE: _____ HEIGHT: _____ COLOUR: _____ SEX: _____

BRANDS, MARKINGS: _____

Dressage: LEVEL YOU ARE CURRENTLY COMPETING AT ON THIS HORSE: _____

How long has the Applicant been riding the horse? _____

* Specify the test for Dressage.

YEAR	AGE GROUP	EVENT*	NO. IN EVENT	TEST	PLACE	% Dressage

(i.e. ONLY outstanding results achieved at Club or Zone level on nominated horse in nominated discipline)

[illegible]

(Give the five you consider your best achievements in the discipline applied for)

Experience of rider with other horses (full details if any): _____

Experience of horse with other riders (full details if any): _____

PREVIOUS INSTRUCTIONAL SCHOOLS ATTENDED:

[illegible]

(15 Positions available at Camp)

FULL NAME OF RIDER: _____

AGE: _____ HEIGHT: _____ COLOUR: _____ SEX: _____

BRANDS, MARKINGS: _____

Showjumping: PONY CLUB GRADE: _____ EA GRADE: _____

YEAR	VENUE	NAME OF EVENT	GRADE	NO. IN EVENT	PLACING

(i.e. outstanding results achieved at Club or Zone level on nominated horse in nominated discipline)

[illegible]

(Give the five you consider your best achievements in the discipline applied for)

(Give the five you consider your best achievements in the discipline applied for)

DATE	VENUE	NAME OF EVENT	AGE GROUP/GRADE	NO. IN EVENT	PLACE

Experience of rider with other horses (full details if any): _____

Experience of horse with other riders (full details if any): _____

PREVIOUS INSTRUCTIONAL SCHOOLS ATTENDED:

[illegible]

PERFORMANCES OF NOMINATED HORSE/RIDER COMBINATION FORM
FOR THE DISCIPLINE OF EVENTING

(15 Positions available at Camp)

PARTICULARS OF NOMINATED HORSE:

FULL NAME OF RIDER: _____

FULL NAME OF HORSE: _____

AGE: _____ HEIGHT: _____ COLOUR: _____ SEX: _____

BRANDS, MARKINGS: _____

Eventing: _____ PONY CLUB GRADE: _____ EA GRADE: _____

How long has the Applicant been riding the horse? _____

STATE CHAMPIONSHIPS ATTENDED ON NOMINATED HORSE:

* Specify if Novice or Advanced for Eventing.

YEAR	VENUE	NAME OF EVENT	AGE GROUP	NOVICE/ADVANCED	NO. IN EVENT	PLACING

OTHER PONY CLUB PERFORMANCES OF HORSE/RIDER COMBINATION WITHIN LAST 2 YEARS ONLY:

(i.e. outstanding results achieved at Club or Zone level on nominated horse in nominated discipline)

DATE	VENUE	NAME OF EVENT	GRADE	NO. IN EVENT	PLACE

NON-PONY CLUB RESULTS OF NOMINATED HORSE/RIDER COMBINATION WITHIN LAST 2 YEARS ONLY:

(Give the five you consider your best achievements in the discipline applied for)

DATE	VENUE	NAME OF EVENT	AGE GROUP / GRADE	NO. IN EVENT	PLACE

Experience of rider with other horses (full details if any): _____

Experience of horse with other riders (full details if any): _____

PREVIOUS INSTRUCTIONAL SCHOOLS ATTENDED:

[illegible]

(15 Positions available at Camp)

FULL NAME OF RIDER: _____

FULL NAME OF HORSE: _____

AGE: _____ HEIGHT: _____ COLOUR: _____ SEX: _____

BRANDS, MARKINGS: _____

How long has the Applicant been riding the horse? _____

YEAR	VENUE	NAME OF EVENT	AGE GROUP	RESULTS

(i.e. outstanding results achieved at Club or Zone level on nominated horse in nominated discipline)

[illegible]

NON-PONY CLUB RESULTS OF NOMINATED HORSE/RIDER COMBINATION WITHIN LAST 2 YEARS ONLY:

(Give the five you consider your best achievements in the discipline applied for)

DATE	VENUE	NAME OF EVENT	AGE GROUP / GRADE	NO. IN EVENT	PLACE

Experience of rider with other horses (full details if any): _____

Any other information relevant to this application: _____

PERFORMANCES OF NOMINATED HORSE/RIDER COMBINATION FORM
FOR THE DISCIPLINE OF (PILOT PROGRAM) ADVANCED HORSEMANSHIP

(10 Positions available at Camp)

CRITERIA:

- a) Are financial members for the year of the State Camp with the Association through their Club before the 1st November in the year prior.
- b) Will be aged 15 to 24 years inclusive on the first day;
- c) Have passed their "C Star" Or "K" certificate;
- d) Are training for their "B" certificate;
- e) Will be mounted on a suitable horse to maximise benefit from top instructors;
- f) Are recommended by their Club and have satisfactory attendance at Pony Club instructional rally days (must have attended at least 3 rally days in the preceding 12 months, copy of attendance card to be included);
- g) Are recommended by their Zone Chief Instructor as a worthy Pony Club member of sufficient standard;
- h) Horse microchipped and vaccinated against Hendra Virus.

PARTICULARS OF NOMINATED HORSE:

FULL NAME OF RIDER: _____

FULL NAME OF HORSE: _____

AGE: _____ HEIGHT: _____ COLOUR: _____ SEX: _____

BRANDS, MARKINGS: _____

How long has the Applicant been riding the horse? _____

STATE CHAMPIONSHIPS ATTENDED ON NOMINATED HORSE:

YEAR	AGE GROUP	EVENT*	NO. IN EVENT	TEST	PLACE

OTHER PONY CLUB PERFORMANCES OF HORSE/RIDER COMBINATION WITHIN LAST 2 YEARS ONLY:

(i.e. ONLY outstanding results achieved at Club or Zone level on nominated horse in nominated discipline)

DATE	VENUE	NAME OF EVENT	AGE GROUP / GRADE	NO. IN EVENT	PLACE

VERIFICATION OF DETAILS

APPLICANT

I, the above applicant, HEREBY CONFIRM that I have carefully read this Application Form including the requirements of the Applicant and the Rules and that I DECLARE that the information given by me is correct and that I shall comply with the rules.

Signed: _____ Date: ____/____/____
Applicant

PARENT/GUARDIAN (IF APPLICANT UNDER 18 YEARS OF AGE)

I, a parent or guardian of the above applicant (if under age of 18 years) HEREBY CONFIRM that I have carefully read this Application Form including the requirements of the Applicant and the Rules and that I DECLARE that the information given by me (or my child) is correct and that I (or my child) shall comply with the rules.

I give permission for my child to lend or borrow other horses while at State Camp if necessary. I give permission for my child to be taken off the grounds if required. (For example in the past due to the possible heat in January we have taken participants to the pool.)

Signed: _____ Phone No: (H) _____
Parent / Guardian
(W) _____

CLUB SECRETARY

I HEREBY CONFIRM that the above applicant is a financial and active member of the above Pony Club and has attended at least three rally days in the preceding twelve months. The Club recommends the applicant as a suitable candidate for the State Camp and so far as I can be aware the information contained herein is true and correct.

Signed: _____ Phone No: _____
Club Secretary

ZONE CHIEF INSTRUCTOR

I HEREBY CONFIRM that the above applicant is known to me and that he/she is of State Championship standard upon the nominated horse in the discipline applied for. I also believe that he/she is a member worthy in all respects of the privilege of attending the camp and that as far I am aware the above information contained herein is true and correct.

Signed: _____ Phone No: _____
Zone Chief Instructor

IF THERE IS MORE THAN ONE APPLICANT FROM EACH ZONE IN EACH DISCIPLINE THE ZONE CHIEF INSTRUCTOR MUST ATTACH A PAGE LISTING ALL APPLICANTS IN ORDER OF PRIORITY IN EACH DISCIPLINE. ZONE CHIEF INSTRUCTORS ARE REQUESTED TO ATTACH A BRIEF SUMMARY OF THE APPLICANT.