

Bunbartha Pony Club Inc. Register Association: A0013659D

Combined Training

Sunday 2nd April 2017

Bunbartha Pony Club grounds, Kaarimba Racecourse Reserve, 3192 Barmah Shepparton Rd, Kaarimba 3635

Entries Close: 25th March 2017

Pony Club Grades 3, 4, 5 & 5A CT \$25.00 Sashes to Fourth Place
Open Grades 3, 4, 5 & 5A CT \$25.00 + (see competition rule 2 for insurance requirements.)Sashes to Fourth Place
No Equal Placings Count-backs as per PCAV rules will be applied

Catering from 9.00 am

Dressage tests – Pony Club & Open Grades Test C (60 mx20m arenas grade 3)

Grade 5A CT- Test 5A (10 yrs & Under only)

Grades	3	4	5	5A-CT
Max Height	0.80	0.65	0.50	0.30
Max Spread At highest point	0.80	0.65	0.50	0.30
Maximum Spread at Base	1.00	0.80	0.65	0.30
Speed Metres/Minute	300	275	250	250
Distance Not More Than	470m	470m	470m	470m

Horse Trials and Showjumping: maximum heights and spreads at max height in metres:-

Conditions of Entry: Entry is conditional upon acceptance of these conditions.

1. Entry Fee is \$25 per entry.
2. Entries must be on the official entry form and be accompanied by the correct entry fees; vet and medical authority must be completed otherwise entries will not be accepted. Open entries must include a completed liability declaration form and photocopy of current membership with one of the listed associations or a waiver form and \$10 fee
<http://ponyclubvic.org.au/?Page=2646> No refunds after closing date except with vet or medical certificate. An admin fee of \$ 5 will be deducted.
3. Entering this competition constitutes acknowledgement that PCAV rules apply and acceptance of these rules.
4. The organizing committee reserves the right to cancel any class or competition; divide any class; alter times; refuse any entry with or without stating the reason.
5. Competitors may ride more than one horse, subject to the conditions of PCAV Handbook of By-laws multiple horse rules.
6. Complying helmets must be worn, spot checks may occur.
7. Gear Check: required for all riders before each phase.
8. Medical Armbands: must be worn by all competitors.
9. Horses must be at least age four, no stallions, colts or rigs.
10. Competitor numbers - the organizing committee will pre-allocate and advise numbers. Competitors may supply their own numbers. Body numbers will be available at the event.
11. PCAV Alcohol Policy applies.
12. Dogs are prohibited without exception.
13. Queries, protests, horse abuse, rules as per the PCAV Handbook of By-Laws.
14. PCAV Lungeing Policy applies. Lunging is permitted at this event in the enclosed Lunging area only.
15. Neither the organizing committee of this competition nor the PCAV accepts any responsibility whatsoever for any accident, damage, injury or illness to horses, riders, ground spectators or any other person or property.
16. **Cross Country Course: Closed no person is permitted on the Cross Country mounted or unmounted. Anyone found on the Cross Country Course will be eliminated.** Camping Permitted tents etc. to be packed away by 7.30 am Competitors are welcome to erect portable yards, all portable yards must be of solid construction as per PCAV rules and pulled down by 7.30 am

MEDICAL RESPONSE AUTHORITY

The Medical & Horse/Veterinary Authority is a compulsory form and must be sent with your entry form

RIDER DETAILS:

Name of Rider:	Click here to enter text.	Click here to enter text.	Date of Birth:	Click here to enter text.
Address of Rider:	Click here to enter text.			
Town/Suburb:	Click here to enter text.	Click here to enter text.	Postcode:	Click here to enter text.
Phone (H):	Click here to enter text.	Click here to enter text.	Mobile:	Click here to enter text.
Email:	Click here to enter text.			
Ambulance Cover	Click here to enter text.	<input type="checkbox"/> NO <input type="checkbox"/> YES Ambulance Number: Click here to enter text.		

Please complete the following section if rider is Under 18 years. Organisers suggest that all competitors complete this section.

Parent/Guardian Name/Emergency Contact:

Address: Postcode:

Phone (h): Mobile:

Email:

I, being the parent/guardian named above or, if no person is named being the competitor aged 18 years or over, give permission for the competitor named above to receive FIRST AID and/or MEDICAL TREATMENT, and being transferred to hospital by ambulance should the need arise during the conduct of the Bunbartha Pony Club Combined training held at Bunbartha Pony Club on the 02/04/2017. I give the President of the Bunbartha Pony Club, or their appointed deputy, my consent to authorize such transfer and to make such emergency medical arrangements as may be deemed necessary by a qualified medical practitioner on my behalf. Before taking this action, the President of Bunbartha Pony Club, or the appointed deputy, must be satisfied that every possible practical effort has been made to contact the accompanying parent/Guardian/Emergency Contact named above. I give authority in the full knowledge that I will be required to pay costs incurred if insurance held by the Bunbartha Pony Club does not cover the ambulance transfer, medical treatment or any other costs involved.

By Inserting your name below and submitting your entry with payment, you are agreeing to above medical authority

Rider's Parent/Guardian Signature/Emergency Contact Signature:

Date:

Open Riders Please Include a completed Day Attendance Form (<http://ponyclubvic.org.au/?Page=2646>)

Email address for emailing of time

Transfer payments to Bunbartha Pony Club, Commonwealth Bank BSB – 063527 Acc No – 10147428

Bank Transfer Receipt No and reference

The Medical & Horse/Veterinary Authority are compulsory forms and must be sent with your Event Entry Form and payments

Please email entry forms to bunbarthaponyclub@gmail.com

Mail completed and signed forms with payment to 140 Marungi rd Katandra West 3634