

**THE PONY CLUB ASSOCIATION OF NEW SOUTH WALES INCORPORATED**

**APPLICATION FORM FOR "A" & "H" CERTIFICATES**

Please complete the following form and return to the Pony Club Association office no later than 30<sup>th</sup> October each year. Training and Examination dates to be advised, at a central point. Any applications received after this date will be held over for testing until the following year.

Return completed application to Association office, PO Box 2085 Wollongong NSW 2500.

Candidate Name: \_\_\_\_\_

Club: \_\_\_\_\_ Zone: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Certificates Held    Year Gained    Examiner


Date of joining Club(s) and Club(s) name where candidate has been a member:


Approximate number of Pony Club rallies attended in the twelve months preceding this application. Give details.

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Approximate number of Pony Club rallies attended in the twelve months preceding the above. Give details.

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Other comments: \_\_\_\_\_

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Particulars of any State Championships in which the candidate has competed during the preceding three years including any placings:

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The following signatures are required to verify the eligibility of the candidate:

Candidate: \_\_\_\_\_ Date: \_\_/\_\_/\_\_

Club Secretary: \_\_\_\_\_ Date: \_\_/\_\_/\_\_

Zone Chief Instructor: \_\_\_\_\_ Date: \_\_/\_\_/\_\_

Zone Secretary: \_\_\_\_\_ Date: \_\_/\_\_/\_\_