

PCASA ZONE TRAINING SQUAD APPLICATION FORM

Each rider must submit an application form before attending Squad functions.

Name of Rider: _____

Address: _____

Telephone: _____ **Mobile** _____

Email: _____

Name of Horse _____ **PC card NO:** _____

Pony Club _____ **Riders date of Birth** _____

Discipline you wish to nominate for:

Dressage.....YES / NO

Show Jumping.....YES / NO

Eventing.....YES / NO

Resumes of past performances' should be prepared and presented to Zone Chief Instructors for information and Zones to pass on to State Office with recommendations to State Squad Training.

All riders **MUST** hold their "C" certificate before they can be selected in a State team to represent PCASA, in a National competition or nomination for International selection.

Riders do not have to hold a C Certificate to participate in training.

I _____ **do / do not hold my "C" certificate.**

Signature of rider (or Parent / Guardian, if under 18 yrs). _____

Rider's Club _____

This form must be signed by the Club Secretary to indicate financial status and also, the Club is aware that the rider is joining the Zone Training Squad.

Club Secretary Signature _____

Zone Secretary Signature _____

Form to be forwarded to State Office with resume, if candidate meets State criteria to be in State Squad. (Criteria same as 2009)

