



Pony Club Association of South Australia Inc.

President: Mr. Greg Bailey



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SHOWJUMPING BUILDING CERTIFICATE TRAINING RECORD

Name of trainee: _____

Club: _____

Name of mentor: _____

Trainees must have assisted their "mentor" on at least four occasions in the past two years. Mentor to complete and sign off:

Date:	Venue:	Signature:

OR Trainee must have completed two of the above plus must have competed at four shows in EA showjumping classes in the past two years.

Date:	Venue:	Signature:

Trainees must have designed and built a course under the supervision of their "mentor". Mentor to complete and sign off:

Date:	Venue:	Signature:

Trainee must be recommended by their "mentor" to the Chief Instructors panel to receive this qualification. Mentor to complete:

Date:	Signature:	Phone number:



Government of South Australia
Office for Recreation and Sport