

(District Commissioner)

THE PONY CLUB LUNGEING TEST NOMINATION FORM

| CANDIDATE INFORMATION: | |
|---|--|
| Name: | |
| Branch: | |
| Address: | |
| | Post code: |
| Telephone: | Mobile: |
| Email: | |
| Date of Birth: | Age on 1 st January of the current year: |
| Date of previous test(s): | |
| Do you need a lunge horse to be provided for the test? Yes / No (Please circle) | |
| I wish to nominate the above Candidate for the Lungeing Test. I hereby certify that: The Candidate holds the 'B' Test Horse and Pony Care. The Candidate has been trained in the subjects required for this Test and is up to the standard required. The Candidate has been assessed lungeing various horses and is up to the standard required according to Pony Club teaching as reported by somebody with experience of this Test. | |
| IMPORTANT INFORMATION: | |
| Candidates who hold the BHS Stage 3 are exempt from the Lungeing Test. Having failed, a Candidate may not re-take the Test until a minimum of two months has elapsed after their unsuccessful attempt. In the event of a Candidate failing the test a new nomination form must be submitted together with a further fee. The Test may only be attempted THREE times. | |
| I enclose the nomination fee as laid down in the current Pony Club Year Book. | |
| Signed: | Date: |